

## REQUEST FOR PROPOSAL (RFP)

RFP No.: CVS-15-073

Issue Date: March 9, 2015

Title: **Domestic Violence Prevention and Services Programs**

Commodity Code: 95221, 95278

Location: Statewide

Initial Contract Period: July 1, 2015 – June 30, 2016

Proposal Due Date and Time: April 15, 2015 (5:00 P.M.)

Issuing Agency: Commonwealth of Virginia  
Department of Social Services  
Division of Community and Volunteer Services  
801 East Main Street, 15<sup>th</sup> Floor  
Richmond, VA 23219-3301

Sealed Proposals for furnishing the services described herein will be received subject to the conditions cited herein until the Proposal Due Date and Time shown above. **Proposals received after that time will not be considered.** Send or hand-deliver all proposals directly to the issuing agency shown above. **Do not fax or e-mail.**

All Inquiries For Information Should Be Directed To: Debbie Tomlinson Phone: (804) 726-7510

In Compliance With This Request For Proposal And To All The Conditions Imposed Therein And Hereby Incorporated By Reference, The Undersigned Offers And Agrees To Furnish The Goods/Services In Accordance With The Attached Signed Proposal Or As Mutually Agreed Upon By Subsequent Negotiation.

▲ Name of Organization	▲ Date of Signature
▲ Address #1	▲ Signature in Ink
▲ Address #2	▲ Type/Print Name of Signatory
▲ City/State/Zip	▲ Title of Signatory
	( )
	▲ Phone
	( )
▲ E-Mail Address	▲ FAX

An **optional** pre-proposal conference will be held on March 25, 2015 at Virginia Department of Social Services, 801 E. Main St., Richmond, VA 23219-2901, from 1:00 P.M. to 3:00 P.M. (see Appendix V for a link to directions).

**Note: This public body does not discriminate against faith-based organizations in accordance with the Code of Virginia, § 2.2-4343.1 or against an applicant because of race, religion, color, sex, national origin, age, disability, or any other basis prohibited by state law relating to discrimination in employment.**

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## I. PURPOSE

The intent and purpose of this Request for Proposals (RFP) being issued by the Virginia Department of Social Services (VDSS), is to solicit sealed proposals to establish contracts through competitive negotiation for the purchase of services through public and private non-profit, incorporated agencies and organizations in Virginia. The main goal of each agency's service program should be as follows:

- To provide direct crisis services to victims of domestic violence. Crisis services include, but are not limited to, hotline services, crisis intervention, safety planning and access to shelter available 24 hours per day to victims of domestic violence who are in imminent danger;
- To meet ongoing needs for adults and their children who have experienced domestic violence by creating a safety plan for each, providing enhanced advocacy and referrals to community-based services, working with the court system to assist victims with protective orders, custody issues and all other legal matters pertaining to their victimization, working with parents to improve interactions with their children, and working with schools, medical professionals, counselors, etc., to ensure the child's case plan is as comprehensive as possible;
- To provide outreach to underserved populations.
- To promote best and promising practices and to fill gaps in services that will help meet identified unmet needs.
- To educate the community and stakeholders on the prevalence and effects of domestic violence in locality.

Applicants may submit only one proposal per agency in response to this RFP. Eligible applicants are incorporated nonprofit organizations and local governments in Virginia providing comprehensive domestic violence services. For all non-profit organizations, proof of IRS 501(c)3 designation is required at the time of application.

Through this single solicitation, funding from multiple streams will be distributed. Each recipient of a sub grant award (Sub Applicant agency) will receive funding for the period from July 1, 2015 through June 30, 2016 from each of the following sources:

Funding Source	Funding Description
<b>VFVPP</b>	The Virginia Family Violence Prevention Program (CFDA 93.667) is a funding source appropriated by the Virginia General assembly for the provision of domestic violence services
<b>FVPSA</b>	The Family Violence Prevention and Services Act (CFDA 93.671) is a federal funding source. Funds are awarded to

	Virginia for the provision of shelter and services for victims of domestic violence.
<b>VOCA</b>	The Victims of Crime Act (CFDA 16.575) is a federal funding source. Funds are awarded to Virginia for the provision of direct services for victims of domestic violence.
<b>TANF</b>	Temporary Assistance for Needy Families (TANF) (CFDA 93.558) is a federal block grant intended to assist low-income families achieve self-sufficiency. The funds are authorized by the General Assembly of Virginia.
<b>State General Funds</b>	State General Funds are funds appropriated by the Virginia General Assembly for the provision of domestic violence services.

For the period of July 1, 2014 through June 30, 2015, a total of \$7,930,511.00 was awarded through the Domestic Violence Prevention and Services Program grant to 47 organizations and local governments. and \$691,223.00 was awarded via the Mid-Year Domestic Violence Grant to 34 agencies. The total combined awarded amount equaled \$8,621,734.00 to 51 organizations and local governments. VDSS has not yet received final notification of funding levels for FY 2016.

**PLEASE NOTE:** The base annual grant award for any funded organization providing services to victims of domestic violence is set at a minimum of \$135,000.00 subject to availability of funds.

## **II. BACKGROUND**

In 1982 the Virginia Department of Social Services (VDSS) began working with the statewide domestic violence coalition and local domestic violence programs to promote effective and supportive services to victims of domestic violence in communities across the Commonwealth.

Since inception, new domestic violence programs have been developed, meeting new or expanded needs of specific communities while other programs have found it necessary to close their doors. Funds provided through this solicitation are intended to support local efforts to provide community-tailored domestic violence services to victims and their children. However, these funds are not sufficient to fully provide even the basic services in every area. Strong local domestic violence programs must obtain funding from a broad base of federal, state and local sources to fully address local needs. Most of the grant funded domestic violence programs have developed a balanced blend of funding sources that has offered financial stability throughout difficult economic times.

### **Trauma Informed Services**

Trauma-informed care (TIC) consists of services provided through a lens of trauma (damage or distress caused to the victim). It requires having a basic understanding of trauma and how trauma impacts survivors, as well as understanding trauma triggers. It also means designing services to acknowledge the impact of violence and trauma on people's lives. Finally, a trauma-informed approach is one that is sensitive and respectful, responds to traumatized survivors with support, and consciously seeks to avoid re-traumatization. It is critically important that trauma-informed services strive to do no harm.

Implementing services that are voluntary, i.e. not requiring clients to participate in certain services, in order to receive other services, has been required by this grant since January 1, 2014 and is part of providing trauma-informed services. However, trauma-informed care goes beyond voluntary services. Some characteristics of trauma-informed care include: services that focus on the individual and the context of her or his life experiences, facilitates growth, healing recovery and resilience, emphasizes emotional and physical safety as well as trust, minimizes the power imbalance between survivor and advocate as much as possible, to work in partnership and is culturally competent and sensitive.

Trauma-informed care for clients who seek domestic violence services is highly recommended under this grant. The Office of Family Violence is committed to supporting programs in their efforts to provide trauma-informed care and will continue to support training and technical assistance on TIC.

### **Engaging Families for Success:**

The Office of Family Violence is also committed to the perspective that improving the safety of the adult victim improves the safety and well-being of the family. Engaging Families for Success (EFS) looks beyond clients as individuals and focuses on strengthening the family unit as a whole.

Research studies support the common sense notion that when protective factors are well established in a family, the likelihood of child abuse and neglect diminishes. Research shows that protective factors are also “promotive” factors that build family strengths and a family environment that promotes optimal child and youth development. The protective factors are an integral component in client-based advocacy and can be found in the services that every Domestic Violence Program (DVP) provides to clients. Intentional efforts to promote protective factors:

- Benefits ALL families
- Builds on family strengths, buffers risk and promotes better outcomes
- Can be implemented through small but significant changes in everyday actions
- Builds on and can become a part of existing programs strategies, systems and community opportunities
- Is grounded in research, practice and implementation knowledge

In the forefront of the EFS is a new vision that supports the practice that families and communities, service systems and organizations should all work collaboratively to:

- Focus on building protective and promotive factors to reduce risk and create optimal outcomes for all children, youth and families
- Recognize and support parents as decision-makers and leaders
- Value the culture and unique assets of each family
- Be mutually responsible for better outcomes for children, youth and families

Adopting this practice of service provision will provide a strong and unified approach to supporting the well-being of families and children. For more information on Family Strengthening Protective Factors, go to: [Strengthening-Families-Protective-Factors.pdf](#).

### **III. STATEMENT OF NEEDS**

Applicants are required to propose services that address the full spectrum of services benefiting victims of domestic violence and their children including, but not limited to victim assistance and domestic violence prevention.

#### **A. Funding Requirements:**

The federal and state funds available for distribution have numerous obligations. Please note that all Applicant agencies shall be required to:

1. Comply with all federal and state laws;
2. Collect statistical information on services provided and enter it into the Virginia Data Collection Project (VAdata) on a daily basis;
3. Budget only for costs and expenses necessary for the performance of grant activities;
4. Ensure that services to victims and their children are:
  - Provided free of charge and regardless of income
  - Provided on a voluntary basis
  - Culturally and linguistically appropriate
  - Accessible and offered to underserved populations
5. Protect the confidentiality of client information;
6. Display Civil Rights/Equal Employee Opportunity information;
7. Prohibit discrimination per Federal regulations;
8. Maintain a grievance policy that outlines the procedures for the complaint process for bullying and/or harassment for the LGBTQ population;
9. Maintain time and attendance records for all grant-funded staff;
10. Utilize volunteers;
11. Provide match, cash or in-kind: 20% for established programs, 35% for new programs (new to this funding stream); and

12. Register with the System for Award Management (SAM) and have a DUNS number. [http://www.grants.gov/applicants/org\\_step2.jsp](http://www.grants.gov/applicants/org_step2.jsp)

Additional requirements are listed in Section VIII, General Terms and Conditions, Section IX, Special Terms and Conditions, and all Assurances listed in Attachment E.

B. Unallowable services/expenses for these grant funds:

1. Services to perpetrators;
2. Juvenile justice activities;
3. Fundraising;
4. Inpatient treatment services;
5. Contract services without prior permission;
6. Lobbying/administrative advocacy; and
7. Research
8. Limit administration, prevention and/or community collaboration time and costs to no more than 25% of any grant funded staff time (all are unallowable with VOCA funds); these services will only be offered through FVPSA and State General Funds.

Additional restrictions are listed in the Virginia Department of Social Services FY 2016 Program Guide for Allowability of Costs – Appendix II.

C. Federal Outcome Measures:

The Family Violence Prevention and Services Act (FVPSA), a program of the US Department of Health and Human Services, requires each state to collect data from the local domestic violence programs regarding the outcomes of services. This project, “Documenting Our Work” (DOW), developed by the National Resource Center, uses data to evaluate domestic violence services and how services provided are helpful to the victims. Subgrantee agencies are required to participate in DOW by distributing and collecting the most current Shelter Survey and Community-Based Services Survey forms in order to provide results for federally required outcome measures. This process is entirely based on the written feedback of those clients being served in local programs. Federal outcome measures are:

1. As a result of contact with the domestic violence program, at least 75% of domestic violence survivors will have strategies for enhancing their safety.
2. As a result of contact with the domestic violence program, at least 75% of domestic violence survivors will have knowledge of available community resources.

D. Statewide Outcome Measures:

The Office of Family Violence worked with local domestic violence programs and other statewide partners to develop new DV Outcomes beginning in FY 2015. Information gleaned from the DOW can be used to strengthen and inform program practice, policy and research as well as to encourage agency accountability to survivors and their children. Subgrantee agencies are required to participate in DOW by distributing and collecting the most current Shelter Survey and Community-Based Services Survey forms in order to report on the following outcomes that will be calculated and reported via VAdata.

The first six of the seven new outcomes listed below will be measured with client feedback provided through DOW surveys. The seventh outcome will be measured from the subgrantee's input into the VAdata Community Engagement Form. This information shall be reported by the subgrantee agencies to VDSS along with other program specific information. The intent of the outcomes is to measure the impact of domestic violence services on the lives of the clients receiving these services and of the program's efforts to educate their community on the issue of domestic and sexual violence. The new outcomes and outcome measures are:

1. Survivors of domestic violence know more about domestic violence and its impact.
  - a. % of clients responding to the DOW survey who report that because of services received, they know more about sexual and/or domestic violence and its impact.
2. Survivors of domestic violence know more about the resources in their community available to them.
  - a. % of clients responding to the DOW survey who report that because of services received, they know more about community resources
3. Survivors of domestic violence are safer
  - a. % of clients responding to the DOW survey who report that because of services received, they know more ways to plan for their safety.
4. All survivors receiving services are welcomed and respected.
  - a. % clients responding to the DOW survey who identify as being from an underserved population who also report feeling welcomed and respected.
5. Survivors have power over their lives
  - a. % of clients responding to the DOW survey who report that because of services received, they know how to take their next steps.
  - b. % of clients responding to the DOW survey who report that they could accept or not accept the services offered to them.



6. Children exposed to domestic violence are emotionally healthy
  - a. % of clients with minor children responding to the DOW survey who report that because of services received, their children know that it's okay to talk about their experiences with violence.
  - b. % of clients with minor children responding to the DOW survey who report that because of services received, they feel that their children are having more positive interactions with others.
7. The community knows more about domestic violence (measured from subgrantee agency input into the VAdat Community Engagement Form)
  - a. % of community members attending trainings and presentations who report that they learned new information that will help them identify and respond to sexual and/or domestic violence.

#### E. Local Outcome Measures

Applicants are encouraged to develop outcomes that are specific to their local services and are reflective of the activities planned for the contract period. Local outcomes should be included in the Evaluation Section of the Narrative as well as the Work Plan. Every local outcome, however, must have a documented method of evaluation that is clearly explained. If the federal and/or statewide outcomes clearly demonstrate the success of services described in the work plan, then they may be used in lieu of, or in addition to local outcome measures.

#### F. Protective Factors Outcomes

As part of a system that provides services to families, it is important that each (DVP) be aware of how their work impacts families and improves the protective factors proven to be vital for success. The following protective factor outcomes are connected to the work of every domestic violence program and are reported on the VAdat report titled "VDSS Outcome Report". The outcome measures may be used in the proposed work plan or as a discussion tool the subgrantee may utilize to analyze the impact of their services on the families they serve.

1. Parents receiving services improve parental resilience (Supports Parental Resilience)
2. Clients report improvements in their social connections because of help they received. (Supports Social Connections)
3. Clients report improvement in their concrete supports in times of need. Parents' knowledge of parenting and child development improved. (Supports Concrete Support in Times of Need)
4. Children's social and emotional competence improved as reported by the Parent. (Supports both the Knowledge of Parenting and Child Development and Social and Emotional Competence of Children)

**G. Linking Outcomes to Work Plan**

1. Sub grantees are encouraged, but not required, to incorporate the federal, state and protective factor outcomes into their work plans. The outcome measures are available in a VAdata report for your agency's use and reporting purposes.
2. Outcomes in the work plan should address client/community needs expressed in the Narrative Section with the desired changes/improvements clearly thought out and explained.

**IV. PROPOSAL PREPARATION AND SUBMISSION INSTRUCTIONS**

**A. GENERAL INSTRUCTIONS**

In order to be considered for selection, Applicants must submit a complete response to this RFP including one (1) original and five (5) copies. The original shall be so marked. In addition, Applicants must submit one (1) complete, signed and scanned proposal on an unprotected CD or jump drive that must be labeled with the RFP number and the name of the Applicant.

1. No other distribution of the proposal shall be made by the Applicant. The signed proposal should be returned in a separate envelope or package, sealed and identified as follows:

	April 13, 2015
▲ <b>Name of Applicant</b>	▲ <b>Due Date/Time</b>
	CVS-15-073
▲ <b>Address #1</b>	▲ <b>RFP Number</b>
	Domestic Violence Prevention & Services Grant
▲ <b>City/State/Zip</b>	▲ <b>RFP Title</b>

The envelope or package should be hand delivered or mailed to:

Division of Community and Volunteer Services  
Attn: Debbie Tomlinson  
Virginia Department of Social Services  
801 East Main Street, 15<sup>th</sup> Floor  
Richmond, VA 23219-3301

2. If mailed, the Applicant takes the risk that the envelope, even if marked as described above, may be inadvertently opened and the information compromised which may cause the proposal to be disqualified. No other correspondence or other proposals should be placed in the envelope or package.
3. Proposal Preparation:

- a. Proposals shall be signed by an authorized representative of the applicant. All information requested should be submitted. Failure to submit all information requested may result in VDSS requiring prompt submission of missing information and/or giving a lowered evaluation of the proposal. Proposals which are substantially incomplete or lack key information may be rejected by VDSS. Mandatory requirements are those required by law or regulation or are such that they cannot be waived and are not subject to negotiation.
- b. Proposals should be prepared simply and economically, providing a straightforward, concise description of capabilities to satisfy the requirements of the RFP. Emphasis should be placed on completeness and clarity of content that addresses every component of proposal instructions. Proposals should be written in a manner that does not presume a high knowledge of domestic violence on the part of the reviewers.
- c. Proposals should be organized in the order in which the requirements are presented in the RFP. All pages of the proposal should be numbered. The proposal should contain a table of contents which cross-references the RFP requirements. Unless requested, no other attachments should be submitted.
- d. As used in this RFP, the terms "must", "shall", "should" and "may" identify the criticality of requirements. "Must" and "shall" identify requirements whose absence will have a major negative impact on the suitability of the proposed solution. Items labeled as "should" or "may" are highly desirable, although their absence will not have a large impact and would be useful, but are not necessary. The inability of an Applicant to satisfy a "must" or "shall" requirement does not automatically remove that Applicant from consideration; however, it may seriously affect the overall rating of the Applicant's proposal.
- e. Proposals must be typed, double spaced on 8.5" x 11" paper using font size no smaller than 12 point. Each copy of the proposal should be bound or contained in a single volume where practical. All documentation submitted with the proposal should be contained in that single volume. The use of paperclips, staples or rubber bands does not meet this requirement. The use of a large binder clip is the preferred method.
- f. Ownership of all data, materials, and documentation originated and prepared for the State pursuant to the RFP shall belong exclusively to the State and be subject to public inspection in accordance with the *Virginia Freedom of Information Act*. Trade secrets or proprietary information submitted by an applicant shall not be subject to public

disclosure under the *Virginia Freedom of Information Act*; however, the applicant must invoke the protections of § 2.2-4342F of the *Code of Virginia*, in writing, either before or at the time the data or other material is submitted. The written notice must specifically identify the data or materials to be protected and state the reasons why protection is necessary. The proprietary or trade secret material submitted must be identified by some distinct method such as highlighting or underlining and must indicate only the specific words, figures, or paragraphs that constitute trade secret or proprietary information. The classification of an entire proposal document, line item prices, and/or total proposal prices as proprietary or trade secrets is not acceptable and will result in rejection of the proposal.

- g. Oral Presentation: Applicants who submit a proposal in response to this RFP may be required to give an oral presentation of their proposal to VDSS. This provides an opportunity for the applicant to clarify or elaborate on the proposal. This is a fact finding and explanation session only and does not include negotiation. VDSS will schedule the time and location of these presentations. Oral presentations are an option of VDSS and may or may not be conducted.

## **B. SPECIFIC PROPOSAL INSTRUCTIONS:**

Proposals should be as thorough and detailed as possible so that the evaluation panel may properly evaluate the applicant's capabilities to provide the required goods/services. Applicants are required to submit the following items as a complete proposal, in the order listed:

1. The RFP cover sheet and all addenda acknowledgments, if any, signed and completed.
2. RFP Checklist / Table of Contents (Attachment G)
3. Domestic Violence Program Information Form (Attachment A)
4. Additional Agency Information forms (Attachments B1 – B5)
5. Statistical reports: (Currently funded programs run and attach a VAdata report titled VDSS Domestic Violence Program for the period July 1, 2013 to June 30, 2014). All others attach a statistical report for services provided for the same time period.
6. Project Narrative –
  - a. **Introduction:** (2 to 3 pages for new applicants; 1 to 2 pages for currently-funded applicants)

**Outline your organization or agency by describing the following:**

- **Agency Description:** Briefly describe the purpose of your agency, the mission statement, the year of establishment, the types of services currently being offered (if a new agency, please also provide the number of clients served in the 12-month period as reflected in your attached statistical report).
- **Project summary:** Provide a brief description of your proposed project that includes the target populations/localities to be served and services to be provided.
- **Agency Qualification:** Describe your agency's experience with similar projects and managing federal/state/local funds, your agency's area of expertise in regard to the proposed activities, and your agency's organizational capability to manage the DVP grant.

**b. Description of Needs/Problem Statement: (4 pages maximum)**

- Provide a statement of need for the proposed activities in your service area by focusing on your unique community. Describe in a detailed manner the needs of victims and children that will be addressed (not the applicant organization's or agency's needs)
- Include needs of underserved populations in your service area, how they were identified as well as how you intend to provide services to them.
- Support your service area's needs with local statistical data; i.e., as evidenced by the data from your agency's service provision, statistics from law enforcement, hospitals, community partners, schools, local departments of social services, homicide statistics, etc.
- Describe the current or proposed relationship/collaboration with stakeholders in your service area regarding domestic violence such as direct services, serving on committees/task forces, sharing office space with partnering agencies, and/or cross-trainings, etc.

**c. Program Goals and Objectives: (5 pages maximum)**

This is your opportunity to explain in a clear and succinct manner, your agency's project plan, staff needed for implementation and the specific services you intend to provide with this funding in clearly measurable terms.

The project's work plan and budget should be linked to and support the activities that are described in this section. Project goals should define the overall direction of a program and state what is to be accomplished by the program. Goals are measurable statements of the desired impact of the program and typically address changes in actual behaviors, such as decreased victimization, increased community involvement or improved safety and well-being.

Objectives or outcomes are specific measurable statements of the desired immediate or direct outcome of a program, which support the accomplishment of a goal. Well-formulated objectives reflect changes in knowledge, attitudes, skills, and/or behaviors that are the direct result of specific activities.

- Identify at least one objective for each problem or need committed to in the problem statement (objectives are outcomes)
- Work Plans will detail the activities and services to be performed that will result in a measurable outcome. Use only the Work Plan to elaborate on what your program will do to meet the objectives, rather than including this information in the narrative. Consider how your work plan will connect to the outcomes listed in Section III. (Work Plan attachments do not count in the page limitations), and
- Identify any best or promising practices to be used in the program

**d. Evaluation: (2 pages)**

Present a plan for determining the degree to which the program objectives/outcomes (described above) are/will be met:

- Present a plan for evaluating accomplishment of program objectives
- Present a plan for evaluating and modifying methods over the course of the program
- Present a plan for establishing the criteria for success
- Present a plan to ensure the agency has capacity to do daily data collection/data entry in VAdata
- Describe how data will be analyzed
- Present a plan for client's completion of the DOW surveys

7. Work Plans (Attachment C.1): Complete the Activities/Outcomes Work Plan forms to describe the project details on Attachment C.1. Activities should clearly outline all of the grant funded work being conducted by the agency staff and volunteers. Copy Attachment C.1 as needed.

Instructions for completing the work plans are listed with the attachments. (*Attach any evaluation tools referenced in the work plan.*)

8. Budget (Attachment D,1): Complete all pages accordingly in the Excel Workbook outlining the proposed budget. All applicants requesting funding must complete a Budget request. Instructions for completing the Budget are located on the 1<sup>st</sup> tab of the Excel Workbook which should be reviewed before entering any information in the document.

Budget Narrative (Attachment D.1): A budget narrative is also a requirement and the template is located on the last tab of the budget workbook. Use this worksheet to justify all proposed expenditures by explaining the cost, how the costs were determined and calculations to support the expense. The cell for the narrative description will expand to accommodate all explanations and they should, therefore, be as comprehensive as possible. *Be mindful that requested costs must be linked to the program goals and objectives. Not doing so could result in individual line item requests not being approved.*

Instructions for the Budget Narrative are located on the first tab with all other Budget Instructions (Attachment D.1).

9. Additional Attachments
  - a. A letter from the agency head, finance director, or treasurer indicating that the agency understands that this is a reimbursable grant and that the agency has sufficient funds available to cover three months of expenses prior to reimbursement. If your agency does not have three months, then a plan of action must be submitted to provide how you will ensure upcoming expenditures will be covered within required time frames.
  - b. Cooperative Agreements demonstrating collaboration with other agencies in the community that reflect the services specifically provided through your work plan.
  - c. Organizational chart that clearly shows all existing and proposed positions listed in the budget and work plan.
  - d. Job Descriptions and qualifications for each position listed in the budget and work plan.
  - e. Signed Authorization / Certifications / Assurances (Attachment E)
  - f. Semi Annual progress reports from the period ending December 31, 2013 and June 30, 2014 – (currently funded programs should submit VAdat reports)
  - g. Copy of most recent audit or financial statement.
  - h. W-9 Form (Attachment F).
  - i. 501 (C)3 Certification from the IRS (non-profit applicants only)
  - j. List of Current members of the Board of Directors (non-profit applicants only).

- k. One complete copy of the RFP must be returned with the original proposal (omit the attachments and appendixes).

## V. EVALUATION AND AWARD CRITERIA

- A. **EVALUATION CRITERIA:** Proposals will be evaluated by a multidisciplinary panel of individuals who have expertise in areas such as domestic violence, family violence, contract management, program development, and other related fields of experience. The evaluation panel will make programmatic and budgetary recommendations for contract awards. To be considered for funding, proposals must first meet the stated objectives, and general and specific requirements outlined in this RFP.

Proposals will be evaluated using an adjectival rating method according to the following descriptions:

Rating	Description
Exceptional	Exceeds requirements and demonstrates an exceptional understanding of goals and objectives. One or more major strengths exist. No significant weaknesses exist.
Acceptable	Demonstrates an acceptable understanding of goals and objectives of the procurement. There may be strengths and weaknesses, however strengths outweigh the weaknesses.
Marginal	Demonstrates a fair understanding of the goals and objectives of the procurement. Weaknesses have been found that out balance any strength that exists. Weaknesses will be difficult to correct.
Unacceptable	Fails to meet an understanding of the goals and objectives of the procurement. The proposal has one or more significant weakness that will be very difficult to correct or are not correctable.

The following criteria will be used in the evaluation and are of equal importance:

1. **Description of Proposed Project**
  - a. Proposed services are directly provided to domestic violence survivors
  - b. Staffing and services are clear
  - c. Proposal gives a clear definition of the population to be served and the need for services
  - d. Proposal includes the identification and outreach to underserved populations
  - e. Work Plans identify measurable outcomes and sufficient activities and outputs
  - f. Work Plans are complete, and reflect the same work as the narrative
2. **Description of Applicant Agency**
  - a. Applicant agency mission addresses provision of services to survivors of domestic violence



- b. Demonstrates community collaboration through description of services and cooperative agreements specific to the work plan
- c. Past 2 semi-annual reports show progress toward FY 2015 outcome measures (for established programs)
- d. Applicant demonstrates history of and commitment to providing comprehensive domestic violence services.
- e. Audit and current fiscal year budget show soundness and a capacity for ongoing operations

**3. Budget**

- a. All costs are reasonable, allowable, and support the proposed activities, outputs and outcomes
- b. Budget forms are accurate and complete. Sources of in-kind match are correctly calculated and meet funding requirements.
- c. Applicant organization or agency, through administrative structure and past performance, demonstrates the ability to maintain required records and fiscal accountability
- d. Budget Narrative fully explains the proposed costs
- e. Salary amount requested for personnel does not exceed the percentage (%) of time spent on project for that position

**4. Other**

- a. Concise, complete and realistic
- b. Reflects “best or promising practices”
- c. Reflects congruence among all application components
- d. Demonstrates planning in all aspects
- e. Table of contents is included and page numbers are accurate
- f. Project evaluation plan is measurable and thorough
- g. Plans for future accreditation are clearly stated and attainable (currently un-accredited programs only)

- B. AWARD TO MULTIPLE APPLICANTS:** Selection shall be made of multiple Applicants deemed to be fully qualified and best suited among those submitting proposals on the basis of the evaluation factors included in the Request for Proposals, including price, if so stated in the Request for Proposals. Negotiations may be conducted with Applicants so selected price may be considered, but need not be the sole determining factor. The agency shall select the Applicants which, in its opinion, have made the best proposal, and shall award the contracts to those Applicants. The Commonwealth reserves the right to make multiple awards as a result of this solicitation. The Commonwealth may cancel this Request for Proposals or reject proposals at any time prior to an award, and is not required to furnish a statement of the reasons why a particular proposal was not deemed to be the most advantageous (*Code of Virginia*, § 2.2-4359D). Should the Commonwealth determine in writing and in its sole discretion that only one Applicant is fully qualified, or that one Applicant is clearly more highly qualified than the others under consideration, a contract may be negotiated

and awarded to that Applicant. The award document will be a contract incorporating by reference all the requirements, terms and conditions of the solicitation and the contractor's proposal as negotiated.

## VI. REPORTING AND DELIVERY REQUIREMENTS

### PROGRESS REPORTS:

Semi-Annual Progress Reports: The Applicant agency shall submit reports on the semi-annual progress of the work plan. Reports will contain detailed descriptions of Program Activities, Outputs, Outcome Measures, Case Studies and other updates. The form is included herein (Attachment H). The second semi-annual report will include both 6-month and year-end data.

## VII. PREPROPOSAL CONFERENCE

OPTIONAL PREPROPOSAL CONFERENCE: An optional pre-proposal conference will be held on March 25, 2015. The purpose of this conference is to allow potential applicants an opportunity to present questions and obtain clarification relative to any facet of this solicitation. Questions need not be in writing. After the pre-proposal conference, however, all additional questions must be submitted in writing to Andrea Hendricks at [andrea.hendricks@dss.virginia.gov](mailto:andrea.hendricks@dss.virginia.gov) for receipt no later than 5:00 p.m., April 2, 2015.

While attendance at this conference will not be a prerequisite to submitting a proposal, applicants who intend to submit a proposal are encouraged to attend. **Bring a copy of the RFP with you.** Any changes resulting from this conference will be issued in a written addendum to the Request for Proposals and posted on the eVA website at [www.eva.virginia.gov](http://www.eva.virginia.gov) and on the Virginia Department of Social Services website at [www.dss.virginia.gov](http://www.dss.virginia.gov) (click on Community Support and then click on Grant Opportunities. Expand the list of Current grants and select the *Domestic Violence Prevention and Services Grant* Number CVS-15-073).

The conference will be held at the Virginia Department of Social Services office located at 801 E. Main Street, Richmond, VA 23219-2901 in the 2<sup>nd</sup> floor conference room. It will be necessary for you to sign in with the VDSS security guard in the lobby and an escort will take you to the conference room.

***For those unable to attend the conference, a phone conference will also be offered. The call in information is:***

Telephone Number:	1-866-842-5779
Conference Code:	8047267911

See Appendix V for a link to directions to the conference and for the registration form.

## VIII. GENERAL TERMS AND CONDITIONS

- A. VENDORS MANUAL: This solicitation is subject to the provisions of the Commonwealth of Virginia *Vendors Manual* and any changes or revisions thereto that are hereby incorporated into this contract in their entirety. The procedure for filing contractual claims is in section 7.19 of the *Vendors Manual*. A copy of the manual is normally available for review at the purchasing office and is accessible on the Internet at [www.eva.virginia.gov](http://www.eva.virginia.gov) (click on Vendor tab, then Vendors Manual).
- B. APPLICABLE LAWS AND COURTS: This solicitation and any resulting contract shall be governed in all respects by the laws of the Commonwealth of Virginia and any litigation with respect thereto shall be brought in the courts of the Commonwealth. The agency and the subgrantee are encouraged to resolve any issues in controversy arising from the award of the contract or any contractual dispute using Alternative Dispute Resolution (ADR) procedures (*Code of Virginia*, § 2.2-4366). ADR procedures are described in Chapter 9 of the *Vendors Manual*. The subgrantee shall comply with all applicable federal, state and local laws, rules and regulations.
- C. ANTI-DISCRIMINATION: By submitting their proposals, applicants certify to the Commonwealth that they will conform to the provisions of the *Federal Civil Rights Act of 1964*, as amended, as well as the *Virginia Fair Employment Contracting Act of 1975*, as amended, where applicable, the *Virginians With Disabilities Act*, the *Americans With Disabilities Act* and § 2.2-4311 of the *Virginia Public Procurement Act* (VPPA). If the award is made to a faith-based organization, the organization shall not discriminate against any recipient of goods, services, or disbursements made pursuant to the contract on the basis of the recipient's religion, religious belief, refusal to participate in a religious practice, or on the basis of race, age, color, gender or national origin and shall be subject to the same rules as other organizations that contract with public bodies to account for the use of the funds provided; however, if the faith-based organization segregates public funds into separate accounts, only the accounts and programs funded with public funds shall be subject to audit by the public body. (*Code of Virginia*, § 2.2-4343.1E).

In every contract over \$10,000 the provisions in 1. and 2. below apply:

1. During the performance of this contract, the subgrantee agency agrees as follows:

- a. The subgrantee agency will not discriminate against any employee or applicant for employment because of race, religion, color, sex, national origin, age, disability, or any other basis prohibited by state law relating to discrimination in employment, except where there is a bona fide occupational qualification reasonably necessary to the normal operation of the contractor. The subgrantee agency agrees to post in conspicuous places, available to employees and applicants for employment, notices setting forth the provisions of this nondiscrimination clause.
  - b. The subgrantee agency, in all solicitations or advertisements for employees placed by or on behalf of the subgrantee agency, will state that such subgrantee agency is an equal opportunity employer.
  - c. Notices, advertisements and solicitations placed in accordance with federal law, rule or regulation shall be deemed sufficient for the purpose of meeting these requirements.
2. The subgrantee will include the provisions of 1. above in every subcontract or purchase order over \$10,000, so that the provisions will be binding upon each subcontractor or vendor.
- D. ETHICS IN PUBLIC CONTRACTING: By submitting their proposals, applicants certify that their proposals are made without collusion or fraud and that they have not offered or received any kickbacks or inducements from any other offer or, supplier, manufacturer or subcontractor in connection with their proposal, and that they have not conferred on any public employee having official responsibility for this procurement transaction any payment, loan, subscription, advance, deposit of money, services or anything of more than nominal value, present or promised, unless consideration of substantially equal or greater value was exchanged.
- E. IMMIGRATION REFORM AND CONTROL ACT OF 1986: By submitting their proposals, applicants certify that they do not and will not during the performance of this contract employ illegal alien workers or otherwise violate the provisions of the federal Immigration Reform and Control Act of 1986.
- F. DEBARMENT STATUS: By submitting their proposals, applicants certify that they are not currently debarred by the Commonwealth of Virginia from submitting bids or proposals on contracts for the type of goods and/or services covered by this solicitation, nor are they an agent of any person or entity that is currently so debarred.

- G. ANTITRUST: By entering into a contract, the subgrantee agency conveys, sells, assigns, and transfers to the Commonwealth of Virginia all rights, title and interest in and to all causes of action it may now have or hereafter acquire under the antitrust laws of the United States and the Commonwealth of Virginia, relating to the particular goods or services purchased or acquired by the Commonwealth of Virginia under said contract.
- H. MANDATORY USE OF STATE FORM AND TERMS AND CONDITIONS FOR RFPs: Failure to submit a proposal on the official state form provided for that purpose may be a cause for rejection of the proposal. Modification of or additions to the General Terms and Conditions of the solicitation may be cause for rejection of the proposal; however, the Commonwealth reserves the right to decide, on a case by case basis, in its sole discretion, whether to reject such a proposal.
- I. CLARIFICATION OF TERMS: If any prospective applicant has questions about the specifications or other solicitation documents, the prospective applicant should contact the person whose name appears on the face of the solicitation no later than five working days before the due date. Any revisions to the solicitation will be made only by addendum issued by a VDSS purchasing officer.
- J. PAYMENT:
1. To Prime Subgrantee agency:
    - a. Invoices for items ordered, delivered and accepted shall be submitted by the subgrantee directly to the payment address shown on the contract. All invoices shall show the state contract number and the federal employer identification number (for proprietorships, partnerships, and corporations).
    - b. Any payment terms requiring payment in less than 30 days will be regarded as requiring payment 30 days after invoice or delivery, whichever occurs last. This shall not affect offers of discounts for payment in less than 30 days, however.
    - c. All goods or services provided under this contract or purchase order, that are to be paid for with public funds, shall be billed by the subgrantee at the contract price, regardless of which public agency is being billed.
    - d. The following shall be deemed to be the date of payment: the date of postmark in all cases where payment is made by mail, or the date of offset when offset proceedings have been instituted as authorized under the *Virginia Debt Collection Act*.
    - e. **Unreasonable Charges**. Under certain emergency procurements and for most time and material purchases, final job costs cannot be accurately determined at the time orders are placed.

In such cases, subgrantee should be put on notice that final payment in full is contingent on a determination of reasonableness with respect to all invoiced charges. Charges which appear to be unreasonable will be researched and challenged, and that portion of the invoice held in abeyance until a settlement can be reached. Upon determining that invoiced charges are not reasonable, the Commonwealth shall promptly notify the subgrantee, in writing, as to those charges that it considers unreasonable and the basis for the determination subgrantee agency may not institute legal action unless a settlement cannot be reached within thirty (30) days of notification. The provisions of this section do not relieve an agency of its prompt payment obligations with respect to those charges that are not in dispute (*Code of Virginia*, § 2.2-4363).

2. To Subcontractors:

a. A subgrantee awarded a contract under this solicitation is hereby obligated:

- (1) To pay the subcontractor(s) within seven (7) days of the applicant agency's receipt of payment from the Commonwealth for the proportionate share of the payment received for work performed by the subcontractor(s) under the contract; or
- (2) To notify the agency and the subcontractor(s), in writing, of the subgrantee's intention to withhold payment and the reason.

b. The subgrantee is obligated to pay the subcontractor(s) interest at the rate of one percent per month (unless otherwise provided under the terms of the contract) on all amounts owed by the subgrantee that remain unpaid seven (7) days following receipt of payment from the Commonwealth, except for amounts withheld as stated in (2) above. The date of mailing of any payment by U. S. Mail is deemed to be payment to the addressee. These provisions apply to each sub-tier contractor performing under the primary contract. A subgrantee's obligation to pay an interest charge to a subcontractor may not be construed to be an obligation of the Commonwealth.

K. PRECEDENCE OF TERMS: The following General Terms and Conditions *VENDORS MANUAL*, APPLICABLE LAWS AND COURTS, ANTI-DISCRIMINATION, ETHICS IN PUBLIC CONTRACTING, IMMIGRATION REFORM AND CONTROL ACT OF 1986, DEBARMENT STATUS, ANTITRUST, MANDATORY USE OF STATE FORM AND TERMS AND CONDITIONS, CLARIFICATION OF TERMS, PAYMENT shall apply in all instances. In the event there is a conflict between any of the other General Terms and Conditions and any Special Terms and

Conditions in this solicitation, the Special Terms and Conditions shall apply.

- L. QUALIFICATIONS OF APPLICANTS: The Commonwealth may make such reasonable investigations as deemed proper and necessary to determine the ability of the applicant to perform the services/furnish the goods and the applicant shall furnish to the Commonwealth all such information and data for this purpose as may be requested. The Commonwealth reserves the right to inspect applicant's physical facilities prior to award to satisfy questions regarding the applicant's capabilities. The Commonwealth further reserves the right to reject any proposal if the evidence submitted by, or investigations of, such applicant fails to satisfy the Commonwealth that such applicant is properly qualified to carry out the obligations of the contract and to provide the services and/or furnish the goods contemplated therein.
- M. TESTING AND INSPECTION: The Commonwealth reserves the right to conduct any test/inspection it may deem advisable to assure goods and services conform to the specifications.
- N. ASSIGNMENT OF CONTRACT: A contract shall not be assignable by the subgrantee in whole or in part without the written consent of the Commonwealth.
- O. CHANGES TO THE CONTRACT: Changes can be made to the contract in any of the following ways:
  - 1. The parties may agree in writing to modify the scope of the contract. Any additional goods or services to be provided shall be of a sort that is ancillary to the contract goods or services, or within the same broad product or service categories as were included in the contract award. Any increase or decrease in the price of the contract resulting from such modification shall be agreed to by the parties as a part of their written agreement to modify the scope of the contract.
  - 2. VDSS may order changes within the general scope of the contract at any time by written notice to the subgrantee. Changes within the scope of the contract include, but are not limited to, things such as services to be performed, the method of packing or shipment, and the place of delivery or installation. The subgrantee shall comply with the notice upon receipt, unless the subgrantee intends to claim an adjustment to compensation, schedule, or other contractual impact that would be caused by complying with such notice, in which case the subgrantee shall, in writing, promptly notify the Purchasing Agency of the adjustment to be sought, and before proceeding to comply with the notice, shall await the Purchasing Agency's written decision affirming, modifying, or revoking the prior written notice. If

the Purchasing Agency decides to issue a notice that requires an adjustment to compensation, the subgrantee shall be compensated for any additional costs incurred as the result of such order and shall give the Purchasing Agency a credit for any savings. Said compensation shall be determined by one of the following methods:

- a. By mutual agreement between the parties in writing; or
- b. By agreeing upon a unit price or using a unit price set forth in the contract, if the work to be done can be expressed in units, and the subgrantee accounts for the number of units of work performed, subject to VDSS's right to audit the subgrantee agency's records and/or to determine the correct number of units independently; or
- c. By ordering the subgrantee to proceed with the work and keep a record of all costs incurred and savings realized. A markup for overhead and profit may be allowed if provided by the contract. The same markup shall be used for determining a decrease in price as the result of savings realized. The subgrantee shall present VDSS with all vouchers and records of expenses incurred and savings realized. VDSS shall have the right to audit the records of the subgrantee as it deems necessary to determine costs or savings. Any claim for an adjustment in price under this provision must be asserted by written notice to VDSS within thirty (30) days from the date of receipt of the written order from VDSS. If the parties fail to agree on an amount of adjustment, the question of an increase or decrease in the contract price or time for performance shall be resolved in accordance with the procedures for resolving disputes provided by the Disputes Clause of this contract or, if there is none, in accordance with the disputes provisions of the Commonwealth of Virginia *Vendors Manual*. Neither the existence of a claim nor a dispute resolution process, litigation or any other provision of this contract shall excuse the subgrantee from promptly complying with the changes ordered by VDSS or with the performance of the contract generally.

P. DEFAULT: In case of failure to deliver goods or services in accordance with the contract terms and conditions, the Commonwealth, after due oral or written notice, may procure them from other sources and hold the subgrantee agency responsible for any resulting additional purchase and administrative costs. This remedy shall be in addition to any other remedies which the Commonwealth may have.

Q. ANNOUNCEMENT OF AWARD: Upon the award or the announcement of the decision to award a contract, as a result of this solicitation, VDSS will publicly post such notice on the DGS/DPS eVA web site ([www.eva.virginia.gov](http://www.eva.virginia.gov)) for a minimum of 10 days.



- R. DRUG-FREE WORKPLACE: During the performance of this contract, the subgrantee agency agrees to (i) provide a drug-free workplace for the subgrantee agency's employees; (ii) post in conspicuous places, available to employees and applicants for employment, a statement notifying employees that the unlawful manufacture, sale, distribution, dispensation, possession, or use of a controlled substance or marijuana is prohibited in the subgrantee agency's workplace and specifying the actions that will be taken against employees for violations of such prohibition; (iii) state in all solicitations or advertisements for employees placed by or on behalf of the subgrantee agency that the subgrantee agency maintains a drug-free workplace; and (iv) include the provisions of the foregoing clauses in every subcontract or purchase order of over \$10,000, so that the provisions will be binding upon each subcontractor or vendor.

For the purposes of this section, "*drug-free workplace*" means a site for the performance of work done in connection with a specific contract awarded to a subgrantee, the employees of whom are prohibited from engaging in the unlawful manufacture, sale, distribution, dispensation, possession or use of any controlled substance or marijuana during the performance of the contract.

- S. NONDISCRIMINATION OF APPLICANT AGENCIES: An applicant shall not be discriminated against in the solicitation or award of this contract because of race, religion, color, sex, national origin, age, disability, faith-based organizational status, any other basis prohibited by state law relating to discrimination in employment or because the applicant employs ex-offenders unless the state agency, department or institution has made a written determination that employing ex-offenders on the specific contract is not in its best interest. If the award of this contract is made to a faith-based organization and an individual, who applies for or receives goods, services, or disbursements provided pursuant to this contract objects to the religious character of the faith-based organization from which the individual receives or would receive the goods, services, or disbursements, the public body shall offer the individual, within a reasonable period of time after the date of his objection, access to equivalent goods, services, or disbursements from an alternative provider.
- T. AVAILABILITY OF FUNDS: It is understood and agreed between the parties herein that VDSS shall be bound hereunder only to the extent of the funds available or which may hereafter become available for the purpose of these contracts (sub grants).
- U. AUTHORIZATION TO CONDUCT BUSINESS IN THE COMMONWEALTH: A contractor organized as a stock or nonstock corporation, limited liability company, business trust, or limited partnership or registered as a registered limited liability partnership shall be authorized

to transact business in the Commonwealth as a domestic or foreign business entity if so required by Title 13.1 or Title 50 of the *Code of Virginia* or as otherwise required by law. Any business entity described above that enters into a contract with a public body pursuant to the *Virginia Public Procurement Act* shall not allow its existence to lapse or its certificate of authority or registration to transact business in the Commonwealth, if so required under Title 13.1 or Title 50, to be revoked or cancelled at any time during the term of the contract. A public body may void any contract with a business entity if the business entity fails to remain in compliance with the provisions of this section.

## **IX. SPECIAL TERMS AND CONDITIONS**

- A. **AUDIT:** The subgrantee shall retain all books, records, and other documents relative to this contract for five (5) years after final payment, or until audited by the Commonwealth of Virginia, whichever is sooner. The agency, its authorized agents, and/or state auditors shall have full access to and the right to examine any of said materials during said period.

The subgrantee further agrees to comply with the audit and reporting requirements defined by the Federal Office of Management and Budget (OMB) circular A-133, "Audits of States, Local Governments and Non-Profit Organizations" as applicable.

A subgrantee who exceeds \$500,000 or more in combined federal funding is required at its expense to have an independent grant audit performed annually in accordance with OMB Circular A-133. A copy of the portion of the audit that affects the program shall be submitted to the Commonwealth of Virginia. The audit report shall be submitted within the earlier of thirty days after receipt of the report by the subgrantee, or nine months after the end of the audit period. The management letter summarizing audit findings must be submitted with the audit report. If there are no audit findings, a letter indicating no findings shall be submitted. The copy of the portion of the audit findings or letter indicating no findings shall be sent to:

Virginia Department of Social Services  
Office of Family Violence  
801 East Main Street, 15<sup>th</sup> Floor  
Richmond, Virginia 23219-2901

Attention: Nancy Fowler

- B. **AWARD TO MULTIPLE APPLICANTS:** Selection shall be made of multiple Applicants deemed to be fully qualified and best suited among those submitting proposals on the basis of the evaluation factors included

in the Request for Proposals, including price, if so stated in the Request for Proposals. Negotiations may be conducted with Applicants so selected. Price may be considered, but need not be the sole determining factor. The agency shall select the Applicants which, in its opinion, have made the best proposal, and shall award the contracts to those Applicants. The Commonwealth reserves the right to make multiple awards as a result of this solicitation. The Commonwealth may cancel this Request for Proposals or reject proposals at any time prior to an award, and is not required to furnish a statement of the reasons why a particular proposal was not deemed to be the most advantageous (*Code of Virginia*, § 2.2-4359D). Should the Commonwealth determine in writing and in its sole discretion that only one Applicant is fully qualified, or that one Applicant is clearly more highly qualified than the others under consideration, a contract may be negotiated and awarded to that Applicant. The award document will be a contract incorporating by reference all the requirements, terms and conditions of the solicitation and the contractor's proposal as negotiated.

- C. **CANCELLATION OF CONTRACT:** The purchasing agency reserves the right to cancel and terminate any resulting contract, in part or in whole, without penalty, upon 60 days written notice to the subgrantee. In the event the initial contract period is for more than 12 months, the resulting contract may be terminated by either party, without penalty, after the initial 12 months of the contract period upon 60 days written notice to the other party. Any contract cancellation notice shall not relieve the subgrantee of the obligation to deliver and/or perform on all outstanding orders issued prior to the effective date of cancellation.
- D. **CONFIDENTIALITY OF PERSONALLY IDENTIFIABLE INFORMATION:** The applicant agency assures that information and data obtained as to personal facts and circumstances related to patients or clients will be collected and held confidential, during and following the term of this agreement, and unless disclosure is required pursuant to court order, subpoena or other regulatory authority, will not be divulged without the individual's and the agency's written consent and only in accordance with federal law or the Code of Virginia. Subgrantee agencies who utilize, access, or store personally identifiable information as part of the performance of a contract are required to safeguard this information and immediately notify the Virginia Department of Social Services (VDSS) of any breach or suspected breach in the security of such information. Subgrantee agencies shall allow the VDSS to both participate in the investigation of incidents and exercise control over decisions regarding external reporting. Subgrantee agencies and their employees working on this project may be required to sign a confidentiality statement.
- E. **SUBGRANTEE AS INDEPENDENT CONTRACTOR:** During the performance of this agreement, the subgrantee shall be regarded as an

independent contractor and not as an agent or employee of the Commonwealth of Virginia or the VDSS. The subgrantee shall be responsible for all its own insurance and federal, state, local and social security taxes.

- F. **SUBGRANTEE MONITORING**: The VDSS may monitor and evaluate the subgrantee's performance under the agreement through analysis of required reports, expenditure statements, site visits, interviews with or surveys of relevant agencies/ organizations and individuals having knowledge of the applicant agency's services or operations, audit reports, and other mechanisms deemed appropriate by the VDSS. The subgrantee shall furnish the VDSS on request information regarding payments claimed for services under this contract. All accounting records must be supported by source documentation and retained in order to show for what purpose funds were spent. All such records shall be made available and produced for inspection when required by the VDSS, its authorized agents, and/or Federal personnel.

Should an audit by authorized state or federal officials result in disallowance of amounts previously paid to the subgrantee, the subgrantee shall reimburse the VDSS upon demand.

Performance under this agreement shall be a primary consideration for extension of this agreement and may be a consideration for future grant awards and negotiations.

- G. **EQUIPMENT**: Equipment purchased under the terms of this agreement shall be limited to equipment indicated in the approved budget incorporated in the contract. The subgrantee shall keep written documentation of any acquisitions purchased and up-date the documentation if additional property or equipment is acquired. The written documentation shall include, but not be limited to: date of acquisition, description of product, serial number, ID number, physical location, cost, and name and phone number of individual using or responsible for the equipment. Equipment purchased under this agreement shall be retained by the subgrantee during the period of performance of the agreement. No depreciation or use charges on equipment purchased under this contract shall be claimed on this or any future contract with the Commonwealth of Virginia or any of its agents.

If the VDSS permits the subgrantee to purchase real property or equipment with grant funds, VDSS retains a residual financial interest, enabling the Department to recover the assets or determine final disposition. This will be accomplished on a case-by-case basis, according to the federal grant guidelines applicable to the grant that is funding the service(s).

- H. **FEDERAL AWARD INFORMATION:** Subgrantee of federal awards must be informed of the Catalog of Federal Domestic Assistance (CFDA) number, grant name and number, grant year and federal awarding agency. The information will become part of the contract.

CFDA Number: 93.671

Federal Grant Name: Family Violence Prevention and Services Act

Federal Grant Award Year: 2014

Federal Grant Number: 1401VAFVPS

Federal Grant Awarding Agency: US Dept of Health and Human Services

CFDA Number: 16.575

Federal Grant Name: Victims of Crime Act

Federal Grant Award Year: 2014

Federal Grant Number: 2014-VA-GX-0051

Federal Grant Awarding Agency: US Dept. of Justice

CFDA Number: 93.558

Federal Grant Name: Temporary Assistance to Needy Families

Federal Grant Award Year: 2014

Federal Grant Number: 1402VATANF

Federal Grant Awarding Agency: US Dept of Health and Human Services

CFDA Number: 93.667

Federal Grant Name: Social Services Block Grant

Federal Grant Award Year: 2014

Federal Grant Number: 1401VASOSR

Federal Grant Awarding Agency: US Dept of Health and Human Services  
(Distributed as the Virginia Family Violence Prevention Program)

- I. **FISCAL ADMINISTRATION:** These funds are not intended to supplant established resources or to duplicate established funds. It is expected that this source of revenue will encourage and stimulate contributions from other public and private sources.

1. A contract will be signed between the Virginia Department of Social Services and the local administrator of the applying agency upon granting of a sub-grant award. Upon approval of the contract, the subgrantee will be reimbursed for expenses on a (monthly/quarterly) basis according to the terms of the contract. Therefore, the applicant agency must be prepared to pay expenses as they are incurred and then submit expenditure statements on a monthly or quarterly basis to the Department of Social Services for reimbursement. (See RFP Section X - Method of Payment for instructions on submission of fourth quarter invoices). The subgrantee should allow 30 days from the time expenditure statements are received by the Department until

reimbursement is received. If errors are found in the expenditure statements, the 30 days will be from the date errors are corrected.

2. The subgrantee will be required to maintain adequate accounting records to support all requests for reimbursement. The subgrantee shall comply with time and effort reporting as required by the Federal Office of Management and Budget (OMB) 2 CFR Part 225 (formerly OMB Circular A-87 Cost Principles for State, Local, and Indian Tribal Governments). All employees paid in whole or in part from grant funds should prepare a timesheet indicating the hours worked on each specific project for each pay period. Based on these timesheets and hourly payroll cost for each employee, a statement indicating the distribution of payroll charges should be prepared and placed in the appropriate files and shall be made available for inspection when required by the State.
- J. **OBLIGATION OF APPLICANT AGENCY:** By submitting a proposal, the applicant covenants and agrees that the applicant has satisfied itself, from its own investigation of the conditions to be met, that the applicant fully understands its obligation and that it will not make any claim for or have right to cancellation or relief from the contract because of any misunderstanding or lack of information.
- K. **OWNERSHIP OF MATERIAL:** Ownership of all data, material and documentation originated and prepared for the State pursuant to the RFP shall belong exclusively to the State and be subject to public inspection in accordance with the Virginia Freedom of Information Act. Trade secrets or proprietary information submitted by an applicant shall not be subject to public disclosure under the Virginia Freedom of Information Act; however, the applicant must invoke the protection of this section prior to or upon submission of the data or other materials, and must identify the data or other materials to be protected and state the reasons why protection is necessary.

Any reports, studies, photographs, negatives, films, videos, or other documents prepared by the subgrantee in the performance of its obligations under this contract shall be the exclusive property of the VDSS and all such materials shall be remitted to the VDSS upon completion, termination or cancellation of this contract. The subgrantee agency shall not use, willingly allow or cause to have such materials used for any purpose other than performance of the subgrantee agency's obligations under this contract without the prior written consent of the VDSS. Any materials produced under this contract must bear a statement that the project was supported by the VDSS and identify the title of the funding source.

- L. **PRIME SUBGRANTEE AGENCY RESPONSIBILITIES:** If approval is granted by the VDSS to subcontract any portion of this contract, the subgrantee agency shall be responsible for completely supervising and directing the work under the contract and all subcontractors that he may utilize, using his best skill and attention. Subcontractors who perform work under this contract shall be responsible to the prime subgrantee agency. The subgrantee agency agrees that he is as fully responsible for the acts and omissions of his subcontractors and of persons employed by them as he is for the acts and omissions of his own employees.
- M. **SUBCONTRACTS:** No portion of the work shall be subcontracted without prior written consent of the VDSS. In the event that the subgrantee agency desires to subcontract some part of the work specified herein, the subgrantee agency shall furnish the VDSS the names, qualifications and experience of their proposed subcontractor(s). The subgrantee agency shall, however, remain fully liable and responsible for the work to be done by its subcontractor(s) and shall assure compliance with all requirements of the contract.
- N. **SUPPLANTATION OF FUNDS:** The applicant assures that funds made available under this contract will not be used to supplant state or local funds, but will be used to increase the amounts of such funds that would be, in the absence of these funds, made available for domestic violence services.
- O. **SMOKE FREE ENVIRONMENT:** By submitting their proposals, applicants certify to the Commonwealth that they will comply with the requirements of Public Law 103-227, Part C - Environmental Tobacco Smoke, also known as the Pro-Children Act of 1994 (Act), which requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provisions of health, day care, education, or library services to children under the age of 18, if the services are funded by Federal programs either directly or through State or local governments, by Federal grant, contract, loan, or loan guarantee. The law does not apply to children's services provided in private residences, facilities funded solely by Medicare or Medicaid funds, and portions of facilities used for inpatient drug or alcohol treatment. Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to \$1000 per day and/or the imposition of an administrative compliance order on the responsible entity.
- P. **STATE CORPORATION COMMISSION IDENTIFICATION NUMBER:** Pursuant to Code of Virginia, §2.2-4311.2 subsection B, a offeror or applicant agency organized or authorized to transact business in the

Commonwealth pursuant to Title 13.1 or Title 50 is required to include in its bid or proposal the identification number issued to it by the State Corporation Commission (SCC). Any offeror or applicant agency that is not required to be authorized to transact business in the Commonwealth as a foreign business entity under Title 13.1 or Title 50 or as otherwise required by law is required to include in its bid or proposal a statement describing why the offeror or applicant agency is not required to be so authorized. Indicate the above information on the SCC Form provided. Contractor agrees that the process by which compliance with Titles 13.1 and 50 is checked during the solicitation stage (including without limitation the SCC Form provided) is streamlined and not definitive, and the Commonwealth's use and acceptance of such form, or its acceptance of Applicant agency's statement describing why the applicant agency was not legally required to be authorized to transact business in the Commonwealth, shall not be conclusive of the issue and shall not be relied upon by the Subgrantee as demonstrating compliance.

- Q. **E-VERIFY PROGRAM:** EFFECTIVE 12/1/13. Pursuant to *Code of Virginia*, §2.2-4308.2., any employer with more than an average of 50 employees for the previous 12 months entering into a contract in excess of \$50,000 with any agency of the Commonwealth to perform work or provide services pursuant to such contract shall register and participate in the E-Verify program to verify information and work authorization of its newly hired employees performing work pursuant to such public contract. Any such employer who fails to comply with these provisions shall be debarred from contracting with any agency of the Commonwealth for a period up to one year. Such debarment shall cease upon the employer's registration and participation in the E-Verify program. If requested, the employer shall present a copy of their Maintain Company page from E-Verify to prove that they are enrolled in E-Verify.

## **X. METHOD OF PAYMENT**

**COMPENSATION** to the subgrantee for delivered services shall be as follows:

- A. The subgrantee shall be paid on a cost reimbursable basis.
- B. Actual expenditures shall be invoiced pursuant to approved line item budget categories as submitted in Attachment D.1.
- C. No amendments to the approved budget may be made without the prior written approval of VDSS. No more than **two** budget amendments will be permitted during the grant period. No budget amendment will be approved within 60 days of the end of the grant year. Budget amendments must be requested using the Budget Amendment Request form accompanied by a narrative.



- D. The invoice period may be monthly **or** quarterly. The subgrantee shall invoice VDSS each month or quarter on forms supplied by VDSS and shall submit an invoice showing no services delivered if that is the case in any invoice period. VDSS shall not be obligated to pay for services when the subgrantee fails to submit invoices for such services within thirty (30) calendar days after the close of the **of the specified invoice period** in which services were delivered. Invoices and financial reports that are valid and correct shall be processed and paid no later than thirty (30) calendar days after receipt of the invoice. If errors are found in the invoice, the 30 days will be from the date errors are corrected.
- E. Fourth quarter, or final invoices shall be submitted in the following manner: One invoice must be received for the months of April and May only. This invoice must be received by the VDSS no later than June 6. (*Applicable to applicant agencies invoicing on a quarterly basis*) An invoice for June expenditures shall be submitted separately no later than July 16 (*applicable to all applicant agencies*).
- F. If the subgrantee agency fails to correctly provide any services and/or reports as specified, and in the time period specified, VDSS may withhold payment of an invoice until said services and/or reports are provided. All services provided by the subgrantee agency pursuant to this grant shall be performed to the satisfaction of VDSS, and in accordance with applicable federal, State and local laws, ordinances, rules and regulations. The subgrantee agency shall not receive payment for work found by VDSS to be unsatisfactory, or performed in violation of federal, State or local laws, ordinances, rule or regulations.
- G. Reimbursement shall be made electronically, using the Virginia Department of Account's Remittance Electronic Data Interchange (EDI).
- H. The subgrantee agency shall be required to maintain accounting records to support all requests for reimbursement. These records shall be available for review by the State. VDSS will monitor expenditures.

## **XI. ATTACHMENTS**

- A. Domestic Violence Program Information
- B. Additional Program Information
- C. Instructions for Completing Work Plan Form
- C.1 Work Plan Form
- D. Instruction for Completing Budget Forms
- D.1 Budget Forms
- E. Authorizations/Certifications/Assurances
- F. W-9 Request For Taxpayer Identification Number
- G. Application Checklist/ Table of Contents

H. Semi-annual Progress Report Forms

**XII. APPENDIXES**

- I. Definitions
- II. Allowable/Unallowable Expenses
- III. Documenting Our Work Surveys
- IV. Pre-Application Workshop Registration Form

# Domestic Violence Program Information Form

## Virginia Department of Social Services

### Request for Proposals Number CVS-15-073

Grant Program:	Domestic Violence Prevention and Services Grant		
Applicant:			
Mailing Address:			
Applicant Federal ID Number:			
Applicant DUNS Number:			
Registered with the SAMS?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Program Title:			
Grant Period:	July 1, 2015 – June 30, 2016		
Application Type: (check all applicable boxes)	<input type="checkbox"/> New <input type="checkbox"/> Currently Funded		
	<b>Project Director</b> (managing the grant activities)	<b>Project Administrator</b> (authorized agency/locality administrator)	<b>Finance</b> (overseeing the project budget and invoices)
Name:			
Title:			
Address			
Phone:			
Fax:			
Email:			
<b>Budget Request:</b>	<b>Total Requested from VDSS</b>	<b>Match</b> (20%-Established or 35%-New)	<b>Total Project Budget</b>
<input type="checkbox"/> Check this box if the program will be invoicing on a <b>Quarterly</b> basis <input type="checkbox"/> Check this box if the program will be invoicing on a <b>Monthly</b> basis			

**Signature of Project Administrator:** \_\_\_\_\_

**Date:** \_\_\_\_\_

## ADDITIONAL APPLICANT INFORMATION

- 1) Applicant Type ☐ Nonprofit ☐ Local Government
- 2) Does the agency provide residential DV shelter directly? ☐ Yes:  # of beds. ☐ No: arranged shelter only
- 3) Check below any and all underserved populations that your agency has identified in your service area. Also indicate if your work plan specifically addresses services or outreach to any of the identified populations.

Identified in service area	Specific activities in Work Plan?	Underserved Populations may include victims who identify as:
		Older adults
		People with disabilities
		Non English speaking/Limited English proficiency
		Lesbian, Gay, Bisexual, Transgender
		Having substance abuse or mental health conditions
		Living in rural areas
		Ethnic or racial minorities

4) **Please run a VAdata report (identified as VDSS- Domestic Violence Program) for FY 2014 (July 1, 2013 to June 30, 2014) and attach it following this page. (Established Programs Only)**

5) Below, check the boxes of the services currently being provided by your agency as well as those to be funded with these VDSS Funds. Any and all services to be funded through the VDSS grant must be included on your work plan and budget.

Provided by DVP	To be Funded with These Funds		Statistics for FY 2014	
		24 Hour Crisis Hotline Service		# of calls
		Shelter (Residential)		# of people/nights
		Shelter (Arranged)		# of people/nights
		Crisis Intervention		# served (advocacy)
		Safety Planning		# served (advocacy)
		Survivor Support Groups		# groups
		Information and Referral		
		Emergency Transportation		
		Coordination of Services		
		Counseling/Support		# served
		Court Accompaniment		# served
		Children's Services		# served
		Children's Support Groups		# of groups
		Systems Advocacy		
		Community Education & Public Awareness		# of presentations
		Prevention Activities other than listed above		
		Other		

**List any other services in the space above**

## ADDITIONAL APPLICANT INFORMATION

6) # of Full Time Staff: \_\_\_\_\_ # of Volunteers: \_\_\_\_\_

# of Part Time Staff: \_\_\_\_\_ # of volunteer hours per year (FY 2014): \_\_\_\_\_

Describe how volunteers are utilized:

7) Does your agency serve other populations in addition to serving victims of domestic violence and their children, i.e. homeless adults / children, substance abusers, people with disabilities?	__ Yes, __ No
---	---------------

**If responding yes to question 7,** please provide a brief description of the population served and the funding sources supporting the work:

8) Is your agency a dual domestic violence / sexual assault program?	__ Yes, __ No
--	---------------

9) List Congressional Districts served by your agency (may be more than one) <a href="#">Link to Congressional Map</a>	_____
---	-------

10) List the localities served by your agency and the funding awarded from each for FY 2015:

		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
<b>TOTAL</b>		\$

Total Domestic Violence Program Revenue (DV Funding Only)			
SOURCE	FY 2014 (ACTUAL)	FY 2015 (PROJECTED)	COMMENTS
From: Virginia Department of Social Services:			
Domestic Violence Grant			
Mid-Year Domestic Violence Grant			
VOCA Child Abuse Treatment			
Child Abuse Prevention			
Other:			
From: Virginia Department of Criminal Justice Services:			
V-STOP			
Victim/Witness Program			
Domestic/Sexual Violence Victim Fund			
From: Virginia Department of Housing and Community Development (DHCD)			
Virginia Homeless Solutions Program			
Other Funding:			
United Way			
Local government			
Fundraising			
Other Revenues / Specify			
<b>Total Revenue</b>	\$	\$	

## FFATA Sub-recipient Required Data

(Federal Funding Accountability and Transparency Act)

<b><i>For VDSS Use Only –</i></b>	
1. Federal Award Identifier Number (FAIN)	
2. Award Title	
3. CFDA	
4. Sub-Award Number	
<b><i>To be completed by Sub-Awardee</i></b>	
5. Sub-Awardee Legal Name	
6. Data Universal Numbering System (DUNS) number – 9 digits	
7. Are you registered with the System for Award Management (SAM)? If Yes, continue to question 8. If No, please go to question 9.	<input type="checkbox"/> Yes <input type="checkbox"/> No
8. Is your registration SAM current and active? If Yes, enter expiration date. If No, continue to question 9.	<input type="checkbox"/> Yes Expiration Date: _____ <input type="checkbox"/> No
9. In your business or organization's previous fiscal year, did your business or organization (including parent organization, all branches, and all affiliates worldwide) receive (1) 80 percent or more of your annual gross revenues in U.S. federal contracts, subcontracts, loans, grants, sub-grants, and/or cooperative agreements; <b>AND</b> (2) \$25,000,000 or more in annual gross revenues from U.S. federal contracts, subcontracts, loans, grants, sub-grants, and/or cooperative agreements? If Yes, continue to question 10. If No, please go to question 12.	<input type="checkbox"/> Yes <input type="checkbox"/> No
10. Does the public have access to information about the compensation of the executives through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986? (To determine if the public has access to the compensation information, see the U.S. Security and Exchange Commission total compensation filings at <a href="http://www.sec.gov/answers/execomp.htm">www.sec.gov/answers/execomp.htm</a> .) If Yes, please go to question 12. If No, please continue to question 11.	<input type="checkbox"/> Yes <input type="checkbox"/> No

<p>11. List the names and total compensation of the top five highly compensated officers.  <i>Total Compensation is the cash and noncash dollar value earned by the executive during the preceding fiscal year and includes the following: salary and bonus; awards of stock, stock options, and stock appreciation rights; earnings for services under non-equity incentive plans; change in pension value, etc. (for more information see 17 CFR 229.402 (c))</i></p> <p><b>Note:</b> State and local governments are exempt from reporting executive compensation.</p>	<p>Officer 1 Name: _____  Officer 1 Compensation: _____</p> <p>Officer 2 Name: _____  Officer 2 Compensation: _____</p> <p>Officer 3 Name: _____  Officer 3 Compensation: _____</p> <p>Officer 4 Name: _____  Officer 4 Compensation: _____</p> <p>Officer 5 Name: _____  Officer 5 Compensation: _____</p>
12. Awardee Street Address 1	
13. Street Address 2	
14. City	
15. State	
16. Zip + 4	
17. Congressional District	
18. Place of Performance – primary site where the work will be performed (POP) Awardee Street Address 1	
19. POP Street Address 2	
20. POP City	
21. POP State	
22. POP Zip + 4	
23. POP Congressional District	

Dun & Bradstreet website: <http://www.dnb.com/us/>

System for Award Management website: [http://www.grants.gov/applicants/org\\_step2.jsp](http://www.grants.gov/applicants/org_step2.jsp)

**I certify that the above Awardee information is correct, accurate, and will be maintained and updated as required to keep registration current.**

\_\_\_\_\_  
Name Title

\_\_\_\_\_  
Signature



**INSTRUCTIONS FOR COMPLETING WORK PLAN  
FORM**

**Performance Measurement** is a system for measuring the **results** of public programs.

**Why Performance Measurement?**

No longer are legislators and funders satisfied with allocating dollars and getting back reports of numbers served and program activities. Performance measurement enables legislators, funding sources, and communities to know what impact the dollars have had i.e. ***what effect or change has resulted from dollars invested and how a person's life or community has been changed.***

Performance measurement starts with "the end in mind" e.g. what do you want to occur as a result of your service?

**Performance measurement consists of:**

**High level outcomes:** Desired results in social health or well-being. High level outcomes reflect the longer-term, global effects the program is intended to achieve. e.g. To reduce child abuse and neglect.

**Activities:** List the key activities/initiatives proposed to achieve the goal(s) and objective(s) of the grant program.

**Staff Responsible:** Indicate the staff or organizations responsible for carrying out each activity/initiative.

**Output:** An output is a process measure which describes the conditions under which measurements will be made. This may refer to the timeframe and/or implementation of an activity/initiative, frequency, number of participants, etc. Process measures are *activity focused and contribute to interim outcomes. They do not reflect qualitative outcomes.* E.g. the number of victims participating in support groups or the number of community presentations.

**Outcomes:** Interim improvements in participant's or community progress towards a high level outcome. Interim outcomes reflect a more immediate or direct effects a program is intended to achieve. Outcomes typically address changes in participant performance/behavior that occur as a result of specific activities. They may include, but are not limited to a change or benefit in behavior, knowledge, skills, attitude, values, or condition.

**Outcome Measures:** Documents the condition of clients after a service has been provided e.g. increased skills, modified behavior, improved condition. Outcome measures address *qualitative outcomes.*

Outcome measures can include research based instruments with demonstrated reliability and validity, statistics, interviews, observations, rating scales, surveys, focus groups, records, goal attainment, etc.

Performance measurement enables program directors and communities to measure program effectiveness and *demonstrate both quantitative and qualitative* results that contribute to a higher level social outcome.

The Applicant may use the statewide measures or may develop measures that are more specific to the needs of their program. Applicants are additionally required to develop at least three outcome measures that address the Strengthening Families Protective Factors.

**Example:**

<b>Activity</b>	Agency “x” will provide parenting classes for parents known to CPS
↓	
<b>Staff Responsible</b>	John Doe
↓	
<b>Output</b>	6 weeks, 2 hour sessions for 10-12 participants, during the period of 9/01/2012 – 6/15/13
↓	
<b>Interim Outcome</b>	Parents will use redirection, positive reinforcement & praise to promote desired behavior
↓	
<b>Outcome Measure</b>	80% of parents completing course will use redirection, praise and positive reinforcement as measured by “x” instrument.

# SAMPLE Work Plan

FROM 7/1/2012 TO 6/30/2013 CONTRACTOR NAME Domestic Violence Agency of the Region CONTRACT # CVS-14-051

**HIGH LEVEL OUTCOME:** To improve the safety of the victims

<b>ACTIVITIES</b> <i>What the service/initiative does.</i>	<b>STAFF RESPONSIBLE</b>	<b>OUTPUT</b> <i>What program produces. Service frequency, participant numbers, begin/end dates.</i>	<b>INTERIM OUTCOMES FOR CHILD, FAMILY OR COMMUNITY</b> <i>Qualitative results from activity. What difference will the service make?</i>	<b>EVALUATION *</b> <i>Qualitative &amp; Quantitative Outcome Measures</i>
Provide crisis intervention and safety planning for domestic violence victims in the shelter within 8 hours of entering shelter.	Shelter staff: Victim Advocate Night Mgrs Children's Adv	Provide crisis intervention and safety planning for 75 domestic violence victims. Services will be provided for clients throughout the grant cycle.	Domestic violence victims will understand the dynamics of domestic violence and the value of safety planning.	At least 70% of domestic violence survivors will be able to identify their safety options through the creation of their own specific safety plan.
Provide educational presentations in the service areas.	Staff 1 Staff 2 Staff 3	24 public education presentations will be made to a total of 150 adults and 800 students in 2 local high schools 9/2012-5/2013	Participants will gain an understanding of the dynamics of domestic violence. They will learn how they can address the problem of domestic violence.	75% of participants surveyed will report an increase in knowledge and understanding of domestic violence on the evaluation forms completed.
Provide appropriate response to those calling the hotline 24-hrs/day, 7 days/wk.	All Staff and Volunteers	1,500 calls will be answered throughout the grant cycle.	Domestic violence victims will have the support and information they need and/or request.	At least 70% of callers making victim related calls to the hotline will be more informed about the dynamics of DV and the services available to them.

## Work Plan

FROM \_\_\_\_/\_\_\_\_/\_\_\_\_ TO \_\_\_\_/\_\_\_\_/\_\_\_\_ CONTRACTOR NAME \_\_\_\_\_ CONTRACT # \_\_\_\_\_

**HIGH LEVEL OUTCOME:**

<b>ACTIVITIES</b> <i>What the service/initiative does.</i>	<b>STAFF RESPONSIBLE</b> <i>List position titles</i>	<b>OUTPUT</b> <i>What program produces. Service frequency, participant numbers, begin/end dates.</i>	<b>INTERIM OUTCOMES FOR CHILD, FAMILY OR COMMUNITY</b> <i><b>Qualitative results</b> from activity. What difference will the service make?</i>	<b>EVALUATION *</b> <i>Qualitative &amp; Quantitative <b>Outcome Measures</b></i>

## BUDGET INSTRUCTIONS

The Word Document version of the Budget will no longer be used. This RFP requires the Excel version of the document that automatically calculates all totals for each worksheet. The tabs at the bottom of this worksheet have been labeled and will guide you through each required section. If you were familiar with the Word version of the Itemized Budget, the worksheets within this workbook follow the same format. Instructions for completing each worksheet are below.

**P1-Budget Summary:** Fill in the cells titled "SUBGRANTEE Name" and "Grant Period" at the top of the worksheet as indicated below. This information will automatically populate throughout the rest of the workbook.

**SUBGRANTEE Name:** Specify the name of your program.

**Grant Period:** The grant period for this RFP is for a (insert grant period here; ex., 12-month period). The grant cycle begins (insert grant cycle here; ex., July 1, 2015 and ends June 30, 2016.)

The Budget Summary worksheet has formulas included that will be automatically populated from other worksheets so no entries in the budget line items are needed. Begin completing your Budget with the tab titled "Salary & Benefits" and continue until you have completed all that apply to your application through the tab titled Budget Narrative.

**P2&3-Salary & Benefits:** This worksheet details which positions will be funded through this grant.

**Staff Positions:** Under Staff Positions please list all staff you are requesting to be funded.

**Hours Per Week:** In the next column list the total number of hours the staff will work per week. (Ex., a full-time employee will work 40 hours per week.) Enter the total number of hours the employee will work in the top cell of this column.

**Hours of Staff Time Allocated to this project:** Please enter the number of hours to be reimbursed through this VDSS grant. (Ex., the employee may work a total of 40 hours per week, but only devotes 25 hours to this project. Enter 25 hours in the bottom cell of this column.)

**Annual Salary:** The column labeled Annual Salary is the gross salary each position will earn working their total hours. (Ex., if the position works 40 hours per week and their annual salary is \$20,000, you will enter \$20,000.) Formulas have been included and will automatically populate the Amount Requested from VDSS column.

**Itemized Budget for Employee Benefits:** This section of the worksheet details the benefits offered to employees of your program.

**Staff Position Number:** Identify which staff positions you are requesting funding for employee benefits for Domestic Violence Expansion of Services and enter into the first column.

- **Annual Cost:** Enter the total, yearly cost for all staff positions listed.

<ul style="list-style-type: none"> <li>• <u>Amount Requested from VDSS:</u> This grant will only pay a pro-rated amount based on the % of time on the project for each funded staff position.</li> </ul>
<ul style="list-style-type: none"> <li>• <u>Total Annual Cost:</u> Sum of the amounts listed (Automatically calculated).</li> </ul>
<ul style="list-style-type: none"> <li>• <u>Total Amount Requested from VDSS:</u> Sum of the amounts listed (Automatically calculated).</li> </ul>

<b>Other Expenses</b>
This tab allows for line items that are being requested for expenses other than salaries and benefits.
<u>Line Items:</u> Each section is divided into a category header (bold) and sub categories. Each <b>bold</b> line item category automatically calculates the sum of the sub categories. Indicate the amount needed for each sub category.
Ex: <b>Rent &amp; Utilities</b> = 4,000.00 (Automatically calculated)
Rent = 3,000.00
Utilities = 500.00
Phone = 500.00
<u>Subtotal For This Page:</u> Sum of the amounts indicated for each category listed on this page (Automatically calculated).
<u>Total Amount Requested from DSS:</u> Sum of the subtotals from pages 2 - 4 (Automatically calculated).

<b>Match:</b> This worksheet lists the Matching funds to support the project.
Matching funds are to be listed separately if requesting funds for more than one category of funding.
20% cash or in-kind match from non-federal sources is required from all <b>currently funded programs</b> . A 35% cash or in-kind match from non-federal sources is required of <b>new programs</b> . Federal funds may never be used as match.
A 20 % match can be calculated by dividing the amount of the request by .80 and subtracting the amount requested from the figure obtained. For example, a budget request of \$100,000 would be divided by .80, which equals \$125,000. Then subtract \$100,000 from \$125,000. The difference of \$25,000 is the 20% match.
A 35% match can be calculated by dividing the amount of the request by .65 and subtracting the amount requested from the figure obtained. For example, a budget request of \$100,000 would be divided by .70, which equals \$153,846. Then subtract \$100,000 from \$153,846. The difference of \$53,846 is the 35% match.
<i>Although the Application Budget allows match for each line item, you are not required to have match in every budget category for which you request grant funds.</i>
<i>Your agency accounting system must be able to track the exact matching funds, so it is in your best interest to keep the match as simple as possible.</i>

<u>Budget Narrative: Use this worksheet to provide your budget narrative according to amounts requested on Pages 1-4. Provide an in-depth summary along with examples of calculations in this sheet.</u>
--

Description of Proposed Expenditures: For each line item, describe exactly what will be paid for, purchased, or how the grant funds will be used in that category to support project related activities. Be sure to include any rates or formulas needed to calculate projected costs.

Example: Printing 500 copies of a new brochure. The cost per item is \$.39.

The cost of 500 (brochures) x .39 (each copy) = \$195.00.

**The Budget Amendment Request** form is included so that all documents pertaining to the budget are inclusive in this workbook. Two budget amendment requests are allowed during each fiscal year. If you find your agency in a position to request a budget amendment, please make any and all changes to the forms contained in this workbook. The budget narrative should only include text for those line items being amended. The budget amendment request form should then be printed, signed, scanned and e-mailed to your VDSS contract administrator along with all supporting documents. ***Please do not submit this form with your initial application.***

**Assume that the grant review committee is unfamiliar with domestic violence programs. Provide as much information as possible about what you will be doing with the funds requested. Unjustified expenses may not be funded.**

BUDGET SUMMARY - DSS FUNDS AND MATCH FUNDS			
SUBGRANTEE Name:			
Grant Period			
BUDGET CATEGORY	TOTAL DSS REQUEST	TOTAL MATCH AMOUNT	TOTAL PROJECT BUDGET
SALARIES	\$ -	-	\$ -
EMPLOYEE BENEFITS	\$ -	-	\$ -
BUILDING	\$ -	-	\$ -
OFFICE & PROGRAM	\$ -	-	\$ -
EQUIPMENT	\$ -	-	\$ -
CONTRACT SERVICES / CONSULTANTS	\$ -	-	\$ -
TRAINING, TRAVEL, TRANSPORTATION	\$ -	-	\$ -
OTHER (Total)	\$ -	-	\$ -
<b>TOTALS</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>
* Awarded funds cannot be used to supplant existing funds.			
Please enter data into yellow fields only!			



ITEMIZED BUDGET - SALARIES						
SUBGRANTEE NAME:		0				
Grant Period:		0				
SALARIES (Staff Position)	Total Hours Per Week	% of Staff Time on this project	% of Staff Time on Administrative Functions, if any	% of time on Prevention Planning & Activities, if any	Annual Salary	Amount Requested from VDSS
	Hours of Staff Time on this project					
TITLE OF STAFF POSITION			The combined total for both functions may not exceed 25% for each staff position.			
1		0.0%				\$0.00
2		0.0%				\$0.00
3		0.0%				\$0.00
4		0.0%				\$0.00
5		0.0%				\$0.00
6		0.0%				\$0.00
7		0.0%				\$0.00
8		0.0%				\$0.00
9		0.0%				\$0.00
10		0.0%				\$0.00
11		0.0%				\$0.00
TOTAL SALARIES Requested from VDSS					\$0.00	\$0.00

Please enter data into yellow fields only!

## ITEMIZED BUDGET - EMPLOYEE BENEFITS

<b>SUBGRANTEE NAME:</b>	<b>0</b>		
<b>Grant Period:</b>	<b>0</b>		
Employee Benefits	Staff Position <i>(Line Item # from previous page)</i>	Total Annual Cost	Amount Requested from VDSS-The % of benefits requested may not exceed % of Staff Time on this project as requested on page above.
FICA			
PENSION/RETIREMENT			
HEALTH INSURANCE			
WORKER'S COMPENSATION			
UNEMPLOYMENT			
OTHER (SPECIFY)			
<b>TOTAL BENEFITS</b>		<b>\$ -</b>	<b>\$ -</b>
Please enter data into yellow fields only!			
<b>Please enter a DETAILED description on the Budget Narrative Tab of this Budget Workbook for each line item requested.</b>			

ITEMIZED BUDGET - OTHER PROPOSED EXPENSES			
SUBGRANTEE Name:		0	
Grant Period:		0	
LINE ITEM	Amount Requested	LINE ITEM	Amount Requested
3. BUILDING	\$	6. CONTRACT SERVICES/ CONSULTANTS	\$
Rent		Domestic Violence Hotline Fees	
Utilities		Interpreters	
Maintenance		7. TRAVEL, TRANSPORTATION, & TRAINING	\$
Household Supplies		Travel	
4. OFFICE AND PROGRAM	\$	Transportation	
Printing		Training	
Postage		8. OTHER	\$
Communications		Other (specify)	
Program Supplies and Costs		Other (specify)	
Publicity/Advertising		Other (specify)	
Office Supplies		Other (specify)	
5. EQUIPMENT	\$	Other Expenses 2 SUB-TOTAL	\$
Equipment Purchase			
Equipment Rental			
Other Expenses 1 SUB-TOTAL	\$	GRAND TOTAL OTHER EXPENSES	\$
* Awarded funds cannot be used to supplant existing funds.			
Please enter data into the yellow fields only!			

## ITEMIZED BUDGET - MATCH DOCUMENTATION

<b>SUBGRANTEE Name:</b>	0				
<b>Grant Period:</b>	0				
BUDGET CATEGORY	BRIEF DESCRIPTION	SOURCE-Supply the original source that is providing the cash or in-kind match.	CASH	IN-KIND VALUE	TOTAL MATCH
Salaries					\$ -
Employee Benefits					\$
Building					\$
Office and Program					\$
Equipment					\$
Contract Services & Consultants					\$
Training, Travel & Transportation					\$
Other (Specify)					\$
<b>Total Amounts Supplied by Match</b>			\$	\$	\$
Please provide a COMPLETE description for all expenses listed in the Itemized Budget for each of the line items					

BUDGET NARRATIVE		
SUBGRANTEE Name:	0	
Grant Period:	0	
Line Item	Budget Request	Narrative Description
<b>SALARIES</b>		
	\$	
<b>BENEFITS</b>		
	\$	
<b>BUILDING</b>		
Rent	\$	
Utilities	\$	
Maintenance	\$	
Household Supplies	\$	
<b>OFFICE AND PROGRAM</b>		
Printing	\$	
Postage	\$	
Communications	\$	
Program Supplies and Costs	\$	
Publicity/Advertising	\$	
Office Supplies	\$	
<b>EQUIPMENT</b>		
Equipment Purchase	\$	
Equipment Rental	\$	
<b>CONTRACT SERVICES/ CONSULTANTS</b>		
Family Violence Hotline	\$	

Interpreters	\$	
<b>TRAVEL, TRANSPORTATION, &amp; TRAINING</b>		
Travel	\$	
Transportation	\$	
Training	\$	
<b>OTHER</b>		
Other (specify)	\$	
Other (specify)	\$	
Other (specify)	\$	
Other (specify)	\$	

# AUTHORIZATIONS & CERTIFICATIONS

*Initial each and sign below*

## Authorization To Receive Automated Data

\_\_\_\_\_ 1. \_\_\_\_\_ (Agency Name) gives permission for the Virginia Department of Social Services to receive aggregate statistical data entered into the statewide data collection system, VAdata, managed by the Virginia Sexual and Domestic Violence Action Alliance. This authorization begins at the beginning of the funding cycle, July 1, 2015 and ends June 30, 2016, or on the ending date of any subsequent contract renewals.

## Certification To Receive Electronic Reimbursement

\_\_\_\_\_ 2. This document constitutes certification that \_\_\_\_\_ (Agency Name) is registered with, or will apply for access to, the Virginia Department of Accounts, Remittance Electronic Data Interchange Virginia. Virginia Department of Social Services will use the REDI system for all reimbursements ([www.doa.virginia.gov](http://www.doa.virginia.gov)).

Checks will be not be made to the applicant agency.

## Confidentiality

\_\_\_\_\_ 3. On behalf of \_\_\_\_\_ (Agency Name), I certify that confidentiality policies are in place prohibiting the agency from:

- 1) disclosing any personally identifying information or individual information collected in connection with services requested, utilized, or denied through our programs, and
- 2) revealing individual client information without the informed, written, reasonably time-limited consent of the person.

I also acknowledge that this requirement prohibits \_\_\_\_\_ (Agency Name) from disclosing, for the purposes of a Homeless Management Information System, personally identifying information about any client. Non-personally identifying data in the aggregate regarding services to clients and non-personally identifying demographic information may be shared in order to comply with Federal, State or tribal reporting, evaluation, or data collection requirements.

**LGBTQ Access to Services –Anti-Harassment/Anti-Bullying Policy for  
Currently-Funded Programs**

- \_\_\_\_\_ 4-A. I certify that \_\_\_\_\_ (Agency name) has a policy in place that addresses accessibility, prevention strategies for discrimination, bullying or harassment against LGBTQ individuals, as well as a response system regarding complaints made by LGBTQ individuals.
- \_\_\_\_\_ I certify that \_\_\_\_\_ (Agency name) has provided training on improving access for LGBTQ individuals, such as the learning modules provided by the Office of Family Violence.
- \_\_\_\_\_ I certify that \_\_\_\_\_ (Agency name) is committed to improving access to services for LGBTQ individuals.

**LGBTQ Access to Services –Anti-Harassment/Anti-Bullying Policy in place by  
7/1/16 for New Programs**

- \_\_\_\_\_ 4-B. I certify that \_\_\_\_\_ (Agency name) must have policy in place by January 1, 2016 to address accessibility, to add prevention strategies for discrimination, bullying or harassment against LGBTQ individuals, as well as system for how to respond to complaints made by LGBTQ individuals.
- \_\_\_\_\_ I certify that \_\_\_\_\_ (Agency name) must have training on improving access for LGBTQ individuals, provided by the Office of Family Violence, by January 1, 2016.
- \_\_\_\_\_ I certify that \_\_\_\_\_ (Agency name) must be committed to improving accessibility for LGBTQ individuals at the beginning of the grant year January 1, 2016.

**No Fee Assurance**

- \_\_\_\_\_ 5. On behalf of \_\_\_\_\_ (Agency Name), I certify that fees are not charged for any services to victims of domestic violence.

**Authorization to Sign Invoices**

- \_\_\_\_\_ 6. I authorize the following people to sign and submit Invoices that reflect grant expenses to VDSS for payment:

\_\_\_\_\_

\_\_\_\_\_



## Agreement with Terms and Conditions

\_\_\_\_\_ 7. I certify that \_\_\_\_\_ (Agency Name) will comply with all Terms and Conditions listed herein and will comply with the provisions of the Victims of Crime Act of 1984, 42, U. S. C. 10601, et. seq., as amended, and all other federal and state laws and guidelines that apply to this award.  
<http://www.navaa.org/misc/Statute.html#10603>

As the duly authorized representative of the applicant, I hereby certify that the applicant will comply with the above certifications.

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title

## State Corporation Commission Form

### Virginia State Corporation Commission (SCC) registration information.

The Applicant, \_\_\_\_\_:  
(Agency Name)

☐ is a corporation or other business entity with the following SCC identification number: \_\_\_\_\_ -  
**OR-**

☐ is not a corporation, limited liability company, limited partnership, registered limited liability partnership, or business trust **-OR-**

☐ is an out-of-state business entity that does not regularly and continuously maintain as part of its ordinary and customary business any employees, agents, offices, facilities, or inventories in Virginia (not counting any employees or agents in Virginia who merely solicit orders that require acceptance outside Virginia before they become contracts, and not counting any incidental presence of the applicant in Virginia that is needed in order to assemble, maintain, and repair goods in accordance with the contracts by which such goods were sold and shipped into Virginia from applicant's out-of-state location) **-OR-**

☐ is an out-of-state business entity that is including with this proposal an opinion of legal counsel which accurately and completely discloses the undersigned applicant's current contacts with Virginia and describes why those contacts do not constitute the transaction of business in Virginia within the meaning of § 13.1-757 or other similar provisions in Titles 13.1 or 50 of the Code of Virginia.

**\*\*NOTE\*\*** >> Check the following box if you have not completed any of the foregoing options but currently have pending before the SCC an application for authority to transact business in the Commonwealth of Virginia and wish to be considered for a waiver to allow you to submit the SCC identification number after the due date for proposals (the Commonwealth reserves the right to determine in its sole discretion whether to allow such waiver): ☐

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title

## **Certifications Regarding Lobbying; Debarment, Suspension And Other Responsibility Matters; And Drug-Free Workplace Requirements**

Applicants should also review the instructions for certification included in the regulations before completing this form. Signature of this form provides for compliance with certification requirements under 34 CFR Part 82, "New Restrictions on Lobbying," and 35 CFR Part 85, "Government-wide Debarment and Suspension (Nonprocurement) and Government-wide Requirements for Drug-Free Workplace (Grants)." The certifications shall be treated as a material representation of fact upon which reliance will be placed when the Department of Energy determines to award the covered transaction, grant, or cooperative agreement.

### **1. Lobbying**

The undersigned certifies, to the best of his or her knowledge and belief, that:

- (1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
- (3) The undersigned shall require that the language of this certification be included in the award documents for all sub awards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subgrantees shall certify and disclose accordingly. This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

### **2. DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS**

- (1) The prospective primary participant certifies to the best of its knowledge and belief, that it and its principals:
  - a. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
  - b. Have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
  - c. Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
  - d. Have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or local) terminated for cause or default.
- (2) Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

### **3. DRUG-FREE WORKPLACE**

This certification is required by the Drug-Free Workplace Act of 1988 (Pub.L. 100-690, Title V, Subtitle D) and is implemented through additions to the Debarment and Suspension regulations, published in the Federal Register on January 31, 1989, and May 25, 1990.

- (1) The applicant agency certifies that it will or will continue to provide a drug-free workplace by:
- a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the applicant agency's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
  - b. Establishing an ongoing drug-free awareness program to inform employees about:
    1. The dangers of drug abuse in the workplace;
    2. The applicant agency's policy of maintaining a drug-free workplace;
    3. Any available drug counseling, rehabilitation, and employee assistance programs; and
    4. The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
  - c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);
  - d. Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will:
    1. Abide by the terms of the statement; and
    2. Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace not later than five calendar days after such conviction;
  - e. Notifying the agency, in writing, within ten calendar days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;
  - f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph (d)(2), with respect to any employee who is so convicted:
    1. Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
    2. Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State or local health, law enforcement, or other appropriate agency;
  - g. Making a good faith effort to continue to maintain a drug- free workplace through implementation of paragraphs (a),(b),(c),(d),(e), and (f).
- (2) The applicant agency may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant:

Place of Performance: (Street address, city, county, state, zip code)

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\_\_\_ Check if there are workplaces on file that are not identified here.

When notice is made to such a central point, it shall include the identification number(s) of each affected grant.  
As the duly authorized representative of the applicant, I hereby certify that the applicant will comply with the above certifications.

\_\_\_\_\_  
NAME of APPLICANT GRANT NUMBER

\_\_\_\_\_  
PRINTED NAME and TITLE of AUTHORIZED REPRESENTATIVE

\_\_\_\_\_  
SIGNATURE DATE

## ASSURANCES - NON-CONSTRUCTION PROGRAMS

Previous Edition Usable  
Standard Form 424B (Rev. 7-97)  
Authorized for Local Reproduction  
Prescribed by OMB Circular A-102

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0040), Washington, DC 20503.

**PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.**

### NOTE:

Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

1. Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project cost) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
7. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition

Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.

8. Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.

9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally-assisted construction sub agreements.

10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.

11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401

et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93- 205).

12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.

13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).

14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.

15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. §§2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.

16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.

17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."

18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.

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SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL

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TITLE

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APPLICANT ORGANIZATION

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DATE SUBMITTED

## **W-9 REQUEST FOR TAXPAYER IDENTIFICATION NUMBER(S) AND CERTIFICATE**

**A W-9 form must be completed and included with each application. The form is a fillable PDF file and may be found at:**

**[https://www.pdfFiller.com/en/project/28805558.htm?form\\_id=6962253](https://www.pdfFiller.com/en/project/28805558.htm?form_id=6962253)**

**Application Checklist/ Table of Contents**

Description	Page Number(s)	Included	Not Included
Cover Sheet	1	<input type="checkbox"/>	<input type="checkbox"/>
Addenda, if any.		<input type="checkbox"/>	<input type="checkbox"/>
Application Checklist / Table of Contents (Attachment G, this page)		<input type="checkbox"/>	<input type="checkbox"/>
Signed Domestic Violence Program Info Form (Attachment A)		<input type="checkbox"/>	<input type="checkbox"/>
Additional Program Information Sheets (Attachment B, 5 pages)		<input type="checkbox"/>	<input type="checkbox"/>
VAdat Report - VDSS Domestic Violence Program (Established Programs Only) 1/11 – 12/11		<input type="checkbox"/>	<input type="checkbox"/>
Project Narrative		<input type="checkbox"/>	<input type="checkbox"/>
Work Plans (Attachments C.1)		<input type="checkbox"/>	<input type="checkbox"/>
Budget Forms (Attachment D.1, 7pages)		<input type="checkbox"/>	<input type="checkbox"/>
Fiscal Letter		<input type="checkbox"/>	<input type="checkbox"/>
Cooperative Agreements		<input type="checkbox"/>	<input type="checkbox"/>
Organizational Chart		<input type="checkbox"/>	<input type="checkbox"/>
Job Descriptions		<input type="checkbox"/>	<input type="checkbox"/>
Confidentiality Policy		<input type="checkbox"/>	<input type="checkbox"/>
Client Consent for the Release of Confidential Information Form – VAWA Compliant			
Signed Authorizations, Certifications and Assurances (Attachment E, 7 pages)		<input type="checkbox"/>	<input type="checkbox"/>
2 Quarterly Progress Reports, Narrative Section Only (Established Programs Only)		<input type="checkbox"/>	<input type="checkbox"/>
Copy of Most Recent Audit		<input type="checkbox"/>	<input type="checkbox"/>
W-9 Form (Attachment F, 1 page)		<input type="checkbox"/>	<input type="checkbox"/>
501(c)3 Certification from the IRS (non-profit applicants only)		<input type="checkbox"/>	<input type="checkbox"/>
List of Current Board Members (non-profit applicants only)		<input type="checkbox"/>	<input type="checkbox"/>
One complete copy of the RFP (pages 1-26) Attached to the Original Only		<input type="checkbox"/>	<input type="checkbox"/>
One original, 5 copies and 1 electronic copy on a CD		<input type="checkbox"/>	<input type="checkbox"/>



## Semi-Annual Progress Report – Cover Page

### Domestic Violence Funding FY 2016

Program Name:		Contract Number:	
Administrator's Name:		E-mail Address:	
Report Period: <i>Check one</i>	<input type="checkbox"/> 7/1 - 12/31/2015 1 <sup>st</sup> reporting period	<input type="checkbox"/> 1/1- 6/30/2016 2 <sup>nd</sup> reporting period and FY14 year end	
<b>Report Due Date:</b>	<b>January 30, 2016</b>	<b>July 31, 2016</b>	
Person Completing Report:			
Telephone Number:		E-mail Address:	
<b>New address or name change? Please tell us here:</b>		<b>Staff changes? Please provide name, position &amp; if new hire or resignation.</b>	

#### Report instructions:

- A.** On **page 2**, provide information for each activity outlined in your approved Work Plan (use the chart below). Copy and fill in the chart for each High Level Outcome. Also, please use the same chart to complete the first and second semi-annual report. *For the second reporting period, please add a second row in a different color, immediately below the row from the first reporting period, so the entire year's activities can be viewed together.*
- B.** On **pages 3 through 6**, **provide** information regarding the following services provided to victims in tables provided.
1. Report the number of volunteers and hours. Please provide totals for end of year report.
  2. Identify the underserved populations that are being focused on for outreach services.
  3. What types of outreach are you doing for your underserved populations? Please note: Provide *specific strategies* that support outreach, i.e. more than providing brochures to a particular group.
  4. Trends/emerging issues impacting domestic violence victims or services in your community.
  5. Notable activities conducted by your agency to improve victim services.
  6. LGBTQ Accessibility and Inclusion policy (Please attach your agency's new documents including non-discrimination and grievance policy-1<sup>st</sup> Report only unless revised during 2<sup>nd</sup> Reporting Period.)
  7. Attach two case studies reflecting the services provided to a victim of domestic violence.
    - 1) One of the two case studies will focus on services provided to meet the needs of a victim of an *under-served population* in your service area. For that underserved population, describe the unique needs.
    - 2) Include at least four (4) services provided by program staff to assist the victim.

- 3) Write from a third person perspective.
  - 4) Include titles of staff that provided services. Only include staff supported by the VDSS Prevention and Services Grant.
  - 5) Describe the services in narrative form, rather than a generic list of services provided.
  - 6) **Please be mindful of confidentiality requirements and do not give any personally identifying information about the individuals served.**
8. Celebrations– Please share any information about exciting, innovative services you have developed, successful fundraisers, new supporters, etc.

## Semi-Annual Progress Report–Domestic Violence Funding FY 2016

<b>Check one:</b>	<input type="checkbox"/> July 1, 2015 – December 31, 2015 1 <sup>st</sup> reporting period	<input type="checkbox"/> January 1, 2016– June 30, 2016 2 <sup>nd</sup> reporting period		
Please fill this sheet out for each semi-annual report, marking the appropriate timeframe. For the second reporting period, please add a second row in a different color, immediately below the row from the first reporting period, so the entire year's activities can be viewed together.				
<b>HIGH LEVEL OUTCOME:</b>				
<b>ACTIVITIES:</b> <i>Explain the service/initiative.</i>	<b>Annual Goal</b>	<b>OUTPUT</b> <i>What the program did.</i> <b># Served/</b> <b># Services</b>	<b>On Target for the report period? Y/N</b> <i>If not on target, explain obstacles and if a Plan of Action has been developed.</i>	<b>Results of Outcome evaluation:</b> <i>If not using statewide measures, please indicate local measure, such as surveys, tracking data, etc.</i> <b>Please note:</b> Outcome data obtained for the first reporting period will be incomplete due to the lag in entry of DOW surveys. Results from the second report will be considered complete.

### Semi-annual report FY 2015- Services provided to victims

<b>VOLUNTEERS</b> 1 <sup>ST</sup> reporting period	<b># of volunteers</b>	<b>0</b>	<b># of volunteer hours</b>	<b>0</b>
<b>VOLUNTEERS</b> 2 <sup>ND</sup> reporting period	<b># of volunteers</b>	<b>0</b>	<b># of volunteer hours</b>	<b>0</b>
<b>TOTALS FOR YEAR</b>	<b>TOTAL # volunteers</b>	<b>0</b>	<b>TOTAL volunteer hrs</b>	<b>0</b>
<b>Period #1-Please list the underserved populations that are being focused on for outreach services.</b>				
<b>Period #2-Please list the underserved populations that are being focused on for outreach services.</b>				
<b>Period #1-What types of outreach are you doing for your underserved populations? Please note: Provide <i>specific strategies</i> that support outreach, i.e. more than providing brochures to a particular group.</b>				
<b>Period #2-What types of outreach are you doing for your underserved populations? Please note: Provide <i>specific strategies</i> that support outreach, i.e. more than providing brochures to a particular group.</b>				
<b>Period #1-Trends/emerging issues impacting domestic violence victims or services in your community.</b>				
<b>Period #2-Trends/emerging issues</b>				

<b>impacting domestic violence victims or services in your community.</b>	
<b>Period #1-Notable activities conducted by your agency to improve victim services.</b>	
<b>Period #2-Notable activities conducted by your agency to improve victim services.</b>	
<b>Period #1-LGBTQ Accessibility and Inclusion policy (Please attach your agency's new documents including non-discrimination and grievance policy-1<sup>st</sup> Report only unless revised during 2<sup>nd</sup> Reporting Period.)</b>	
<b>Period #2-LGBTQ Accessibility and Inclusion policy (Please attach your agency's new documents including non-discrimination and grievance policy-1<sup>st</sup> Report only unless revised during 2<sup>nd</sup> Reporting Period.)</b>	

## Semi-annual report FY 2016- Services provided to victims

<b>Case study 1</b>	
<b>Period #2-Case Study 1</b>	
<b>Case study 2 (underserved population)</b>	
<b>Period #2-Case study 2</b>	
<b>Celebrations!!!</b>	
<b>Period 2- Celebrations!!!</b>	

## **APPENDIX I**

### **DEFINITIONS**

**Administrative advocacy** refers to any attempt to understand and intercede in the rulemaking process on the federal, state, or local level.

**Administrative Work** is any time, work, or efforts directed at the overall needs of the program including, but not limited to bookkeeping, fund raising, grant writing, or research.

**Community Collaboration** is a working practice whereby community service providers work together for a common purpose to achieve optimal outcomes for victims of domestic violence. ...

**Direct Services** include many types assistance given to victims of domestic violence and their children including but not limited to the activities involved with crisis and core services.

**Domestic Violence Crisis and Core Services** include but are not limited to:

**24-Hour Crisis Telephone Service (Hotline):** Telephone access to support and crisis counseling and information regarding the program's services to domestic violence survivors and their children on a twenty-four hour basis.

**Children's Services:** Services provided by the Domestic Violence Program that address the safety and immediate service needs of children of victims who are receiving services.

**Coordination of Services:** Work on behalf of victims of domestic violence assuring access to resources that will meet each victim's needs.

**Crisis Counseling and Safety Planning:** Counseling provided by trained volunteers/staff to assess the immediate needs of victims of domestic violence, assist with exploring options to create a course of action to maintain victim safety, and respond to the immediate crisis.

**Emergency Transportation:** Access to a mode of transportation for domestic violence victims and their children as they to leave a violent situation and gain access to a safe location.

**Information and Referral:** To disseminate information regarding community resources and referrals to victims of domestic violence and members of the public to educate and empower the service recipients.

**Legal Advocacy:** Work with and on behalf of victims of domestic violence who are using the legal system to meet their identified needs. Legal advocacy must support and empower victims as they explore their legal options

**Shelter:** Temporary emergency housing, including safe homes, motels and/or a shelter facility.

A **Residential Shelter** is a facility operated by the applicant agency to provide safe accommodations, available 24-hours a day, 7 days a week, for victims of domestic violence and their children who are in danger or in fear of further abuse.

**Supportive Counseling:** Counseling, support, and education provided by an individual trained in domestic violence counseling.

**Volunteer Program:** A system for recruiting, training, and utilizing volunteers in the domestic violence program.

**Established Program** means any program which **CURRENTLY RECEIVES** funding from the Virginia Department of Social Services through domestic violence contracts.

**Finance Officer** is the person responsible for fiscal management of funds,

**In-kind Match** is a specified amount of non-cash contributions (assigned a dollar value) designated for the funded grant award amount. An example of in-kind match is unpaid volunteer time that has been assigned a dollar value, based on the agency or market value of the services in your community.

**New Program** means any program **NOT CURRENTLY** funded by the Department of Social Services for the provision of domestic violence services.

**Match** is the amount of funding provided by the applicant needed to draw down an award for most federal grants. Match may be provided by either cash or in-kind donations.

**Personally Identifying Information** is any information that may be used to identify a particular victim. Such information includes name, date of birth, social security number, and address.

**Prevention Work** is any time, work, or effort done with the goal of domestic violence prevention. This work may include, but is not limited to, public awareness activities, school presentations, developing or distributing literature or participation on community collaboration teams.

**Project** All services, activities and efforts presented in this proposal and funded by VDSS.

**Project Administrator** is the person who has authority to formally commit the not-for-profit organization, locality, or state agency to complying with all the terms of the grant application including the provision of the required cash/in-kind match. This **must** be the chief executive officer of the applicant organization, the highest elected officer of the locality, or, in the case of a state agency, the agency head. If someone other than one of these officials has been delegated the authority to sign, and signs the grant application, provide a copy of the letter, memorandum or other document by which the signing authority was delegated.

**Project Director** is the person who has day-to-day responsibility for managing the project

**Services to Underserved Populations** means programs and protocols that make services available to domestic violence victims who are members of underserved populations. Populations may be underserved due to ethnic, racial, cultural, language diversity, or geographic isolation. In some circumstances, these populations may be overrepresented in service statistics yet remain underserved because their needs are not adequately met.

**Virginia Department of Social Services** is the issuing agency and the purchaser. Also referred to as VDSS or the Department.



## **APPENDIX II**

### Virginia Department of Social Services FY 2013 Program Guide for Allowability of Costs

	Budget Line Item	Yes = Y, No = N, Restrictions on use = R			
		VOCA	FVPSA	STATE General Funds	Allowable for VDSS Domestic Violence Grant?
<b>1</b>	<b>PERSONNEL</b>				
	Direct Service Staff	Y	Y	Y	Y
	Direct Service Supervisor	Y	Y	Y	Y
	Administrative & Support Staff	R Only for the portion of time used for program documentation, victim records, required reports and statistics.	Y	Y	R Only for the portion of time used for program documentation, victim records, required reports and statistics.
	Fundraiser/fund development	N	N	N	N
	Board/Advisory Council members	N	N	N	N
	Stipends/Honorariums	N	N	Y	N
	Bonuses	N	N	N	N
<b>2</b>	<b>PAYROLL TAXES &amp; BENEFITS</b>				
	For Personnel as allowed above	Y	Y	Y	Y
	Deferred compensation match	N	N	N	N
	Severance for direct service staff	Y	Y	Y	Y
<b>3</b>	<b>BUILDING</b>				
	<b>Rent/Mortgage</b>				
	Rent (prorated)	Y	Y	Y	Y
	Mortgage payments	N	N	N	N
	<b>Utilities</b>				
	Gas, electric, water & sewer	Y	Y	Y	Y
	Security Systems	Y	Y	Y	Y
	<b>Insurance</b>				
	Building liability	N	N	Y	N
	Personal property	N	N	Y	N
	<b>Maintenance and Repairs</b>				
	Building modifications (handicap access)	Y (if owned)	Y	Y	Y
	Building improvements	N	Y	Y	N
	Garbage collection	Y	Y	Y	Y
	Cleaning service	Y	Y	Y	Y
	Building repairs	Y (if owned)	Y	Y	Y
	<b>Household Supplies</b>				
	Cooking utensils/dishware	Yes, for shelter programs only			
	Bedding and linens	Yes, for shelter programs only			
	Cleaning supplies	Y	Y	Y	Y
	Paper products	Y	Y	Y	Y

	First Aid kit and supplies	Y	Y	Y	Y
<b>4</b>	<b>OFFICE AND PROGRAM EXPENSES</b>				
	<b>Printing</b>				
	Administrative policies and paperwork (incl Annual Report)	N	N	Y	Y
	Protocols, working agreements	N	Y	Y	Y
	Needs Assessments/surveys/studies	N	Y	Y	Y
	Brochures, program literature	Y	Y	Y	Y
	Public presentations materials	Y	Y	Y	Y
	General public awareness on issues	N	Y	Y	Y
	Community education of non-victims	N	Y	Y	Y
	<b>Postage</b>				
	Administration related correspondence	N	N	Y	Y
	Program and educational materials	Y	Y	Y	Y
	Client correspondence	Y	Y	Y	Y
	<b>Communications</b>				
	Phone leases & maintenance fees	Y	Y	Y	Y
	Billing (local long distance, and toll-free)	Y (direct services)	Y	Y	Y
	Voice mail, call waiting	Y	Y	Y	Y
	Cable or satellite dish	N	N	Y	N
	Internet service	Y	Y	Y	Y
	<b>Program Supplies and Costs</b>				
	Victim food and meals	Y	Y	Y	Y
	Victims support group food	Y	Y	Y	Y
	Staff meeting snacks	N	N	Y	N
	Board meeting foods	N	N	Y	N
	Support group supplies	Y	Y	Y	Y
	Children's activity supplies	Y	Y	Y	Y
	Shelter based family support activities	Y	Y	Y	Y
	Client emergency basic need items	Y	Y	Y	Y
	Client medical costs	N	N	N	N
	Resource materials, books, videos	Y (direct services)	Y	Y	Y
	Computer software (separate purchase)	Y (direct services)	Y	Y	Y
	Subscriptions to newspapers, magazines	Y	Y	Y	Y
	Software development	Y	Y	Y	Y
	<b>Publicity/Advertising</b>				
	Recruitment of staff (grant funded only)	Y	Y	Y	Y
	Recruitment of volunteers	Y	Y	Y	Y
	Public information and event notices	Y (direct services)	Y	Y	Y
	Purchase of promotional items	N	Y	Y	Y
	Web page development	N	Y	Y	Y
	<b>Office Supplies</b>				
	Paper, pens, folders, toner, etc.	Y (direct services)	Y	Y	Y
	Business computer software	N	Y	Y	Y
	<b>Insurance</b>				
	Malpractice (professional liability)	Y	Y	Y	Y
	Auto insurance	Only if vehicle was purchased with grant funds			R

	<b>Equipment maintenance/repair/lease</b>				
	Shelter program equipment	Y	Y	Y	<b>Y</b>
	Vehicle	Only if vehicle was purchased with grant funds			<b>R</b>
<b>5</b>	<b>EQUIPMENT Purchases</b>				
	Shelter program equipment (washer, dryer, freezer, refrigerator, stove)	Y	Y	Y	<b>Y</b>
	Phone Systems (purchase)	Y	Y	Y	<b>Y</b>
	Cell phones	Y	Y	Y	<b>Y</b>
	Typewriters	Y	Y	Y	<b>Y</b>
	Shredders	Y	Y	Y	<b>Y</b>
	Copiers	Y	Y	Y	<b>Y</b>
	Fax machines	Y	Y	Y	<b>Y</b>
	Computers	R	R	Y	<b>R</b>
	Overhead and LCD projectors	Y	Y	Y	<b>Y</b>
	DVD players	Y	Y	Y	<b>Y</b>
	Television	Y	Y	Y	<b>Y</b>
	TTY/TDD machines & Braille equipment	Y	Y	Y	<b>Y</b>
	Filing cabinets	R	Y	Y	<b>R-Only for grant-funded staff @ the % on grant</b>
	Desks and Chairs	R	Y	Y	<b>R-Only for grant-funded staff @ the % on grant</b>
	Client use sofas, chairs, tables, etc.	Domestic Violence Shelter Programs Only			
	Playground equipment	Domestic Violence Shelter Programs Only			
	Lighting	Y	Y	Y	<b>Y</b>
	Security equipment	Y	Y	Y	<b>Y</b>
	Vehicle (prior approval required)	Y	Y	Y	<b>Y</b>
<b>6</b>	<b>CONTRACT SERVICES / CONSULTANTS</b>				
	Interpreters	Y	Y	Y	<b>Y</b>
	Mental health providers	Y	Y	Y	<b>Y</b>
	In-service trainer for direct service staff development	Y	Y	Y	<b>Y</b>
	In-service trainer for administration or board service	N	N	N	<b>Y</b>
	Bookkeeping/Financial/Auditing	N	Y	Y	<b>Y</b>
	Administrative services	N	Y	Y	<b>Y</b>
	Legal services for program	N	Y	Y	<b>Y</b>
	Animal care for sheltered victims	Y	Y	Y	<b>Y</b>
	Hotel/Motel safe housing	Y	Y	Y	<b>Y</b>
	Domestic Violence Hotline Fees	Y	Y	Y	<b>Y</b>
<b>7</b>	<b>TRAVEL , TRANSPORTATION &amp; TRAINING</b>				
	<b>Travel and Transportation</b>				
	Direct service work mileage and lodging	Y	Y	Y	<b>Y</b>
	Administration mileage and lodging	N	Y	Y	<b>Y</b>
	Transportation for client safety	Y	Y	Y	<b>Y</b>
	Bus tickets, tokens, taxi (victim	Y	Y	Y	<b>Y</b>

	transportation)				
	Board/Advisory Council business	N	N	Y	Y
	Laundry, entertainment, alcohol	N	N	N	N
	Direct service work meals	Y	Y	Y	Y
	Victim relocation expenses	N	N	Y	Y
	<b>Training</b> (includes travel, meals, lodging, mileage, registration)				
	For direct service staff and volunteers	Y	Y	Y	Y
	For administration services	N	Y	Y	Y
	Direct service training provided to other agencies	N	Y	Y	Y
	Crime victim participation in conferences	N	Y	Y	Y
	Purchase of books, manuals, DVDs (direct service)	Y	Y	Y	Y
	Web-based training	R	Y	Y	Y
	Food provided at training	N	Y	N	N
	Salary payment for training participants	N	N	N	N
<b>8</b>	<b>Other</b>				
	Indirect Costs	N	N	Y	N
	Memberships to professional organizations	Y	Y	Y	Y
	Program relocation expenses	N	N	R	R
	Fees for Accreditation	Y	Y	Y	Y

For further detail about federal funding guidelines, please use the following links:

- Victims of Crime Act (VOCA)  
[http://www.justicia.gobierno.pr/rs\\_template/v2/FonFed/Download/Ref\\_C\\_VOCA.pdf](http://www.justicia.gobierno.pr/rs_template/v2/FonFed/Download/Ref_C_VOCA.pdf)
- Family Violence Prevention and Services Act (FVPSA)  
<http://uscode.house.gov/download/pls/42C110.txt>
- Temporary Assistance to Needy Families (TANF)  
[http://www.whitehouse.gov/omb/assets/omb/fedreg/2005/083105\\_a87.pdf](http://www.whitehouse.gov/omb/assets/omb/fedreg/2005/083105_a87.pdf)

SAMPLE ONLY – NOT FOR PROGRAM USE

**Community-Based Services Survey**

The information you provide will be shared and used to improve services in your community and across Virginia. Feel free to skip any question you are not comfortable answering.

**1) As of today, how long have you been receiving services? (please check one)**

- ☐ Less than a week      ☐ More than 1 month but less than 3 months  
☐ 1 week to 1 month      ☐ 3 months or more

**2) If a friend of mine was thinking of coming here for help, I would: (please check one)**

- ☐ Strongly recommend coming here      ☐ Recommend NOT coming here  
☐ Recommend coming here      ☐ Strongly recommend NOT coming here

**3) People come to our program for many different reasons. Please tell us more about whether or not you got the help you wanted from the program (Please check one in each section below).**

<b>1. Help meeting basic financial needs</b> <input type="checkbox"/> I got some or all of the help I wanted <input type="checkbox"/> I wanted this help, but did not get it <input type="checkbox"/> I did not want or need this help	<b>2. Help with immigration concerns</b> <input type="checkbox"/> I got some or all of the help I wanted <input type="checkbox"/> I wanted this help, but did not get it <input type="checkbox"/> I did not want or need this help
<b>3. Help finding safe and affordable housing</b> <input type="checkbox"/> I got some or all of the help I wanted <input type="checkbox"/> I wanted this help, but did not get it <input type="checkbox"/> I did not want or need this help	<b>4. Help addressing my emotional needs</b> <input type="checkbox"/> I got some or all of the help I wanted <input type="checkbox"/> I wanted this help, but did not get it <input type="checkbox"/> I did not want or need this help
<b>5. Help with the legal system/legal issues</b> <input type="checkbox"/> I got some or all of the help I wanted <input type="checkbox"/> I wanted this help, but did not get it <input type="checkbox"/> I did not want or need this help	<b>6. Help with the impact of the violence on my relationships with family and friends</b> <input type="checkbox"/> I got some or all of the help I wanted <input type="checkbox"/> I wanted this help, but did not get it <input type="checkbox"/> I did not want or need this help
<b>7. Help with transportation</b> <input type="checkbox"/> I got some or all of the help I wanted <input type="checkbox"/> I wanted this help, but did not get it <input type="checkbox"/> I did not want or need this help	<b>8. Help accessing health care services</b> <input type="checkbox"/> I got some or all of the help I wanted <input type="checkbox"/> I wanted this help, but did not get it <input type="checkbox"/> I did not want or need this help

**4) Because of the services received from this program so far:**

- |  |  |
|--|--|
| a. I know more ways to plan for my safety  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| b. I know more about community resources   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| c. I know more about sexual and/or domestic violence and its impact                          | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| d. I am more hopeful about my life   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| e. I know how to take my next steps  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| f. I feel that my children know that it's okay to talk about their experiences with violence | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| g. I feel that my children are having more positive interactions with others                 | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| h. Staff made me feel that I could accept or not accept the services offered to me           | <input type="checkbox"/> Yes <input type="checkbox"/> No |

Turnover

**5) We try our best to make sure people feel welcomed and respected. Please tell us how we did.**

<b>1. Staff made me feel welcome</b> <input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree  If you did not feel welcomed, please tell us about your concerns.	<b>2. Staff treated me with respect</b> <input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree  If you did not feel respected, please tell us about your concerns.	<b>3. Staff respected my background and beliefs</b> <input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree  If you did not feel your background and beliefs were respected, please tell us about your concerns.
---	---	--

**6) What do you think you would have done if these services did not exist?**

**7) Please describe any difficulties or concerns you have had with our services.**

**8) Please describe any positive experiences you have had with our services.**

We ask the next few questions to see if different people have different experiences here. This can improve our services. Please skip any question that you worry may identify you.

**1) I am a survivor of (check one):** ☐ Domestic Violence ☐ Sexual Violence ☐ Both Sexual and Domestic Violence

**2) I consider myself to be (check all that apply):**

- ☐ African American/Black      ☐ Caucasian/White      ☐ Hispanic/Latino(a)  
☐ Asian/Pacific Islander      ☐ Native American/Native Alaskan      ☐ Other

**3) My age is (check one):** ☐ under 29 ☐ 30-39 ☐ 40-49 ☐ 50-59 ☐ 60 and over

**4) My gender is (check one):** ☐ Female ☐ Male ☐ Transgender

**5) My sexual orientation is: (check one):** ☐ Heterosexual/Straight ☐ Gay/Lesbian/ Bisexual/Queer ☐ Other

**6) I am a person with a disability (check one):** ☐ Yes ☐ No

**7) I have minor children:** ☐ Yes ☐ No

January 2014

SAMPLE ONLY – NOT FOR PROGRAM USE

**Shelter Resident Survey**

The information you provide will be shared and used to improve services in your community and across Virginia. Feel free to skip any question you are not comfortable answering.

**1) As of today, how long have you been at the Shelter? (Please check one)**

- ☐ Less than a week      ☐ More than 1 month but less than 3 months  
☐ 1 week to 1 month      ☐ 3 months or more

**2) If a friend of mine was thinking of coming here for help, I would: (please check one)**

- ☐ Strongly recommend coming here      ☐ Recommend NOT coming here  
☐ Recommend coming here      ☐ Strongly recommend NOT coming here

**3) People come to our shelter for many different reasons. Please tell us more about whether or not you got the help you wanted while in Shelter (Please check one in each section below).**

<b>1. Help meeting basic financial needs</b> <input type="checkbox"/> I got some or all of the help I wanted <input type="checkbox"/> I wanted this help, but did not get it <input type="checkbox"/> I did not want or need this help	<b>2. Help with immigration concerns</b> <input type="checkbox"/> I got some or all of the help I wanted <input type="checkbox"/> I wanted this help, but did not get it <input type="checkbox"/> I did not want or need this help
<b>3. Help finding safe and affordable housing</b> <input type="checkbox"/> I got some or all of the help I wanted <input type="checkbox"/> I wanted this help, but did not get it <input type="checkbox"/> I did not want or need this help	<b>4. Help addressing my emotional needs</b> <input type="checkbox"/> I got some or all of the help I wanted <input type="checkbox"/> I wanted this help, but did not get it <input type="checkbox"/> I did not want or need this help
<b>5. Help with the legal system/legal issues</b> <input type="checkbox"/> I got some or all of the help I wanted <input type="checkbox"/> I wanted this help, but did not get it <input type="checkbox"/> I did not want or need this help	<b>6. Help with the impact of the violence on my relationships with family and friends</b> <input type="checkbox"/> I got some or all of the help I wanted <input type="checkbox"/> I wanted this help, but did not get it <input type="checkbox"/> I did not want or need this help
<b>7. Help with transportation</b> <input type="checkbox"/> I got some or all of the help I wanted <input type="checkbox"/> I wanted this help, but did not get it <input type="checkbox"/> I did not want or need this help	<b>8. Help accessing health care services</b> <input type="checkbox"/> I got some or all of the help I wanted <input type="checkbox"/> I wanted this help, but did not get it <input type="checkbox"/> I did not want or need this help

**4) Because of the services I have received from this program so far:**

- |  |  |
|--|--|
| a. I know more ways to plan for my safety  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| b. I know more about community resources   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| c. I know more about sexual and/or domestic violence and its impact                          | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| d. I am more hopeful about my life   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| e. I know how to take my next steps  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| f. I feel that my children know that it's okay to talk about their experiences with violence | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| g. I feel that my children are having more positive interactions with others                 | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| h. Staff made me feel that I could accept or not accept the services offered to me           | <input type="checkbox"/> Yes <input type="checkbox"/> No |

**5) We try our best to make sure people feel welcomed and respected. Please tell us how we did.**

<b>1. Staff made me feel welcome</b> <input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree  If you did not feel welcomed, please tell us about your concerns.	<b>2. Staff treated me with respect</b> <input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree  If you did not feel respected, please tell us about your concerns.	<b>3. Staff respected my background and beliefs</b> <input type="checkbox"/> Strongly Agree <input type="checkbox"/> Agree <input type="checkbox"/> Disagree <input type="checkbox"/> Strongly Disagree  If you did not feel your background and beliefs were respected, please tell us about your concerns.
---	---	--

**6) What do you think you would have done if the Shelter did not exist?**

**7) Please describe any difficulties or concerns you had while living at the Shelter.**

**8) Please describe any positive experiences you had while at the Shelter.**

We ask the next few questions to see if different people have different experiences here. This can improve our services. Please skip any question that you worry may identify you.

**1) I am a survivor of (check one):** ☐ Domestic Violence    ☐ Sexual Violence    ☐ Both Sexual and Domestic Violence

**2) I consider myself to be (check all that apply):**

- ☐ African American/Black    ☐ Caucasian/White    ☐ Hispanic/Latino(a)  
☐ Asian/Pacific Islander    ☐ Native American/Native Alaskan    ☐ Other

**3) My age is (check one):** ☐ under 29    ☐ 30-39    ☐ 40-49    ☐ 50-59    ☐ 60 and over

**4) My gender is (check one):** ☐ Female    ☐ Male    ☐ Transgender

**5) My sexual orientation is: (check one):** ☐ Heterosexual/Straight    ☐ Gay/Lesbian/ Bisexual/Queer    ☐ Other

**6) I am a person with a disability (check one):** ☐ Yes    ☐ No

**7 I have minor children:** ☐ Yes    ☐ No

Turnover

January 2014

## **APPENDIX IV**

### **Optional Pre-Application Conference**

[Virginia Department of Social Services](#)

[801 E. Main Street](#)

[Richmond, VA 23219-2901](#)

#### **Registration Form**

#### **Domestic Violence Prevention and Services Grant**

**Wednesday, March 25<sup>th</sup>, 2015**

**1:00 – 3:00 p.m., 2<sup>nd</sup> Floor Conference Room**

***For those unable to attend the conference, a phone conference will also be offered.  
The call in information is:***

**Telephone Number: 1-866-842-5779**

**Conference Code: 8047267911**

**Registration for attendance is not required, but appreciated, by 3/20/2015**

Name:

Program:

Total # Attending:

Others Attending:

Please print and have with you: the RFP, all attachments and all appendices.  
Copies will not be provided for all attendees at the conference.

Email Registration to:

[deborah.tomlinson@dss.virginia.gov](mailto:deborah.tomlinson@dss.virginia.gov)